2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000112176

Entity Name: IMAGO, INC

FILED Feb 26, 2005 Secretary of State

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Current Principal Place of Business:			New Princ	New Principal Place of Business:	
	LE TERRACE DN, FL 33317	US			
Current Mailing Address:			New Mailing Address:		
	LE TERRACE DN, FL 33317	US			
FEI Number:	20-0294317	FEI Number Applied For () FEI	Number Not Appli	icable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				Address of New Registered Agent:	
TOBAR, JULIA E 5366 MYRTLE TERRACE PLANTATION, FL 33317 US					
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.					
SIGNATURE:					
Electronic Signature of Registered Agent Date					
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () D TOBAR, LEONARI 5366 MYRTLE TE PLANTATION, FL	DO RRACE	Title: Name: Address: City-St-Zip:	P (X) Change () Addition TOBAR, LEONARDO 4108 SW 23 STREET FORT LAUDERDALE, FL 33317 US	
Title: Name: Address: City-St-Zip:	VP () D BRIOSO, MARINO 4221 SW 23 COU FORT LAUDERDA	JR.	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	TR () D TOBAR, JULIA E 5366 MYRTLE TE PLANTATION, FL	RRACE	Title: Name: Address: City-St-Zip:	DF (X) Change () Addition TOBAR, JULIA E 5366 MYRTLE TERRACE PLANTATION, FL 33317 US	
Title: Name: Address: City-St-Zip:	()D	elete	Title: Name: Address: City-St-Zip:	T () Change (X) Addition TOBAR, DANIEL F 5366 MYRTLE TERRACE PLANTATION, FL 33317	
Title: Name: Address: City-St-Zip:	() D	elete	Title: Name: Address: City-St-Zip:	DO () Change (X) Addition BRIOSO, YESENIA 4221 SW 23 COURT FORT LAUDERDALE, FL 33317	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JULIA E. TOBAR DF 02/26/2005