## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000085627

Entity Name: IMPERIO CONSTRUCTION, INC.

ARELLANO, JUAN N JR.

JACKSONVILLE, FL 32277 US

7705 MONETTA DR.

Name:

Address:

City-St-Zip:

FILED Apr 11, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 5327 FAIRMONT STREET JACKSONVILLE, FL 322075027 US **Current Mailing Address: New Mailing Address:** PO BOX 57491 JACKSONVILLE, FL 32241 US FEI Number: 86-1107732 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ARELLANO, PETRA 10757 CLYDESDALE DR EAST JACKSONVILLE, FL 32257 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition ARELLANO, PETRA Name: Name: 10757 CLYDESDALE DR EAST Address: Address: City-St-Zip: JACKSONVILLE, FL 32257 US City-St-Zip: Title: Title: () Delete () Change () Addition ARELLANO, JUAN N Name: Name: 10757 CLYDESDALE DR EAST Address: Address: JACKSONVILLE, FL 32257 US City-St-Zip: City-St-Zip: Title: Title: DIR (X) Delete () Change () Addition ARELLANO, MARTIN E Name: Name: 5315 SANDERS RD Address: Address: City-St-Zip: JACKSONVILLE, FL 32211 US City-St-Zip: Title: DIR (X) Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

Name:

Address:

City-St-Zip:

SIGNATURE: PETRA ARELLANO PRES 04/11/2007