

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000155975

FILED
Jul 09, 2007
Secretary of State

Entity Name: INFINITE MANAGEMENT SERVICES CORP.

Current Principal Place of Business:

720 E. MCNAB RD.
POMPANO BCH, FL 33060 US

New Principal Place of Business:

Current Mailing Address:

720 E. MCNAB RD.
POMPANO BCH, FL 33060 US

New Mailing Address:

FEI Number: 02-0733271

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INFINITE MANAGEMENT SERVICES, CORP.
720 E MCNAB ROAD
POMPANO BEACH, FL 33060 US

Name and Address of New Registered Agent:

LAWSON, CHRIS PRES
720 E MCNAB ROAD
POMPANO BEACH, FL 33060 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: CHRIS LAWSON

07/09/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LAWSON, CHRISTOPHER S
Address: 760 E MCNAB ROAD
City-St-Zip: POMPAN0 BCH, FL 33060 US

Title: VP () Delete
Name: RIFKIN, BRIAN
Address: 760 E MCNAB ROAD
City-St-Zip: POMPAN0 BCH, FL 33060 US

Title: SECY () Delete
Name: VITALE, DOMENICK
Address: 760 E MCNAB ROAD
City-St-Zip: POMPAN0 BEACH, FL 33060 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LAWSON, CHRISTOPHER S
Address: 720 E MCNAB ROAD
City-St-Zip: POMPAN0 BCH, FL 33060 US

Title: VP (X) Change () Addition
Name: RIFKIN, BRIAN
Address: 720 E MCNAB ROAD
City-St-Zip: POMPAN0 BCH, FL 33060 US

Title: SECY (X) Change () Addition
Name: VITALE, DOMENICK
Address: 720 E MCNAB ROAD
City-St-Zip: POMPAN0 BEACH, FL 33060 US

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: CHRIS LAWSON

PRES

07/09/2007

Electronic Signature of Signing Officer or Director

Date