

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000159435

Entity Name: IMA EVALUATIONS, INC.

**FILED**  
**Jan 06, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

660 WHITE PLAINS ROAD  
SUITE # 630  
TARRYTOWN, NY 10591 US

**New Principal Place of Business:**

**Current Mailing Address:**

660 WHITE PLAINS ROAD  
SUITE # 630  
TARRYTOWN, NY 10591 US

**New Mailing Address:**

FEI Number: 20-1919610

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FORM-A-CORP INC  
100 VILLAGE SQUARE CROSSING  
SUITE 103  
PALM BEACH GARDENS, FL 33410 US

**Name and Address of New Registered Agent:**

ESTEVEZ, LUIS  
1431 NW 13TH TERRACE  
MIAMI, FL 33125 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: LUIS ESTEVEZ

01/06/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DPTS  
Name: PULVER, DAVID C M.D.  
Address: 660 WHITE PLAINS ROAD  
City-St-Zip: TARRYTOWN, NY 10591 US

I hereby 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 all other like empowered.

SIGNATURE: JEANINE DELONG

CFO

01/06/2012

Electronic Signature of Signing Officer or Director

Date