2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000036012

Entity Name: IMA DISTRIBUTORS INC

FILED Sep 27, 2006 Secretary of State

Current Principal Place of Business:

169 E FLAGLER STREET STE 1118 169 E FLAGLER STREET MIAMI, FL 33131

STE: 1620

MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address: New Mailing Address:

169 E FLAGLER STREET STE 1118 169 E FLAGLER STREET

MIAMI, FL 33131 STE: 1620

MIAMI, FL 33131

FEI Number: 20-2510504 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:

GLINSKY, MICHAEL GLINSKY, MICHAEL 169 E FLÁGLER STREET 169 E FLÄGLER STREET STE 1118

MIAMI, FL 33131 STE: 1620 MIAMI, FL 33131 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: MICHAEL GLINSKY 09/27/2006

> 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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

GLINSKY, MICHAEL GLINSKY, MICHAEL Name: Name:

169 E FLAGLER STREET STE 1118 Address: 169 E FLAGLER STREET STE: 1620 Address:

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33131

Title: Title: () Delete (X) Change () Addition

Name: GIROGIO, DI Name: GIROGIO DI

169 E FLAGLER STREET STE 1118 Address: 169 E FLAGLER STREET STE: 1620 Address:

MIAMI, FL 33131 MIAMI, FL 33131 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: MICHAEL GLINSKY 09/27/2006 D