

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000063906

Entity Name: IMA ENTERPRISES, INC

FILED
Mar 30, 2009
Secretary of State

Current Principal Place of Business:

3032 N. GOLDENROD RD
WINTER PARK, FL 32792

New Principal Place of Business:

25631 COUNTY ROAD CR 561
ASTATULA, FL 34705

Current Mailing Address:

3032 N. GOLDENROD RD
WINTER PARK, FL 32792

New Mailing Address:

25631 COUNTY ROAD CR 561
ASTATULA, FL 34705

FEI Number: 20-4828904

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AKTER, SALINA
3032 N. GOLDENROD RD
WINTER PARK, FL 32792 US

Name and Address of New Registered Agent:

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: SALINA AKTER

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: AKTER, SALINA
Address: 3032 N. GOLDENROD RD
City-St-Zip: WINTER PARK, FL 32792

Title: VP () Delete
Name: JALIL, ABDUL
Address: 3032 N. GOLDENROD RD
City-St-Zip: WINTER PARK, FL 32792

Title: S () Delete
Name: SHEIKH, MOHAMMED NURU
Address: 3032 N. GOLDENROD RD
City-St-Zip: WINTER PARK, FL 32792

Title: T () Delete
Name: BEGUM, ROKEYA
Address: 3032 N. GOLDENROD RD
City-St-Zip: WINTER PARK, FL 32792

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: JALIL, ABDUL
Address: 25631 COUNTY ROAD 561
City-St-Zip: ASTATULA, FL 34705

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SALINA AKTER

P

03/30/2009

Electronic Signature of Signing Officer or Director

Date