

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000141908

Entity Name: IMPRESSIONABLES, INC.

FILED  
Apr 25, 2007  
Secretary of State

**Current Principal Place of Business:**

32125 SW 199TH COURT  
HOMESTEAD, FL 33030

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 901310  
HOMESTEAD, FL 33090

**New Mailing Address:**

FEI Number: 22-3946367

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

PHILCOX, MARY L PRES  
32125 SW 199 COURT  
HOMESTEAD, FL, FL 33030 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: MARY PHILCOX

04/25/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: PHILCOX, MARY  
Address: 32125 SW 199TH COURT  
City-St-Zip: HOMESTEAD, FL 33030

Title: V ( ) Delete  
Name: CONNER, SEAN  
Address: 32125 SW 199TH COURT  
City-St-Zip: HOMESTEAD, FL 33030

Title: S ( ) Delete  
Name: CONNER, TARA  
Address: 32125 SW 199TH COURT  
City-St-Zip: HOMESTEAD, FL 33030

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: MARY PHILCOX

PTD

04/25/2007

Electronic Signature of Signing Officer or Director

Date