

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000025012

Entity Name: HINES IMPERIAL INC.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

5639 DEL PRADO DRIVE
201
TAMPA, FL 33617

New Principal Place of Business:

8501 N. 50TH STREET
910
TAMPA, FL 33617

Current Mailing Address:

5639 DEL PRADO DRIVE
201
TAMPA, FL 33617

New Mailing Address:

8501 N. 50TH STREET
910
TAMPA, FL 33617

FEI Number: 20-8523746

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HINES, CANDACE
5639 DEL PRADO DRIVE
201
TAMPA, FL 33617 US

Name and Address of New Registered Agent:

HINES, CANDACE
8501 N. 50TH STREET
910
TAMPA, FL 33617 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: CANDACE E HINES

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: HINES, CANDACE
Address: 5639 DEL PRADO DRIVE #201
City-St-Zip: TAMPA, FL 33617

Title: D () Delete
Name: HINES, CANDACE
Address: 5639 DEL PRADO DRIVE #201
City-St-Zip: TAMPA, FL 33617

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: HINES, CANDACE
Address: 8501 N. 50TH STREET #910
City-St-Zip: TAMPA, FL 33617

Title: D (X) Change () Addition
Name: HINES, CANDACE
Address: 8501 N. 50TH STREET #910
City-St-Zip: TAMPA, FL 33617

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: CANDACE E HINES

PVST

04/30/2009

Electronic Signature of Signing Officer or Director

Date