

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000069153

Entity Name: IMEREX INC.

FILED
Jan 20, 2009
Secretary of State

Current Principal Place of Business:

7645 MEADOW LAKES DRIVE
#1
NAPLES, FL 34104

New Principal Place of Business:

235 COCOANUT AVE
#102
SARASOTA, FL 34236

Current Mailing Address:

7645 MEADOW LAKES DRIVE
#1
NAPLES, FL 34104

New Mailing Address:

235 COCOANUT AVE
#102
SARASOTA, FL 34236

FEI Number: 26-0273775

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASSESE, ROBERT JR.
7645 MEADOW LAKES DRIVE
#1
NAPLES, FL 34104 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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CASSESE, ROBERT JR.
Address: 7645 MEADOW LAKES DRIVE #1
City-St-Zip: NAPLES, FL 34104

Title: VP (X) Delete
Name: CARRASCO, VICTOR
Address: 114 BLACKSTONE DRIVE
City-St-Zip: FORT MYERS, FL 33912

Title: D () Delete
Name: LOTT, ROXANNE S
Address: 235 COCOANUT AVE/ #102
City-St-Zip: SARASOTA, FL 34236 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: LOTT, ROXANNE S
Address: 235 COCOANUT AVE/ #102
City-St-Zip: SARASOTA, FL 34236 US

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: ROBERT CASSESE

P

01/20/2009

Electronic Signature of Signing Officer or Director

Date