

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P40585

1. Entity Name
IMAP INC.



Principal Place of Business
745 7TH AVE
NEW YORK, NY 10019

Mailing Address
70 HUDSON STREET
JERSEY CITY, NJ 07302

FILED

07 MAY -9 AM 11:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04192007 No Chg-P CR2E034 (11/05)

4. FEI Number
13-3555152

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301

DO NOT WRITE
IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S WELIKSON, JEFFREY A 745 7TH AVE NEW YORK, NY 10019 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T LOWITT, IAN T 745 7TH AVE NEW YORK, NY 10019 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | AT O'BRIEN, BARRY J 745 7TH AVE NEW YORK, NY 10019 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD CHO, YON K 745 7TH AVE NEW YORK, NY 10019 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D WALSH, MARK A 745 7TH AVE NEW YORK, NY 10019 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | AS GUTH, AARON J 745 7TH AVE NEW YORK, NY 10019 |

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bumy J. O'Brien

04/19/07 (201) 499-6899

Date

Daytime Phone #