

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000016793

FILED  
Feb 24, 2012  
Secretary of State

**Entity Name:** IMPERIAL BUSINESS PARK, INC.

**Current Principal Place of Business:**

90 EDGEWATER DRIVE #503  
SUITE 503  
CORAL GABLES, FL 33133 US

**New Principal Place of Business:**

**Current Mailing Address:**

90 EDGEWATER DRIVE  
SUITE 503  
CORAL GABLES, FL 33133 US

**New Mailing Address:**

**FEI Number:** 65-0475604

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CARLOS, PETER  
90 EDGEWATER DRIVE  
STE 503  
CORAL GABLES, FL 33133 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

**OFFICERS AND DIRECTORS:**

**Title:** PDST  
**Name:** CARLOS, PETER  
**Address:** 90 EDGEWATER DRIVE STE #503  
**City-St-Zip:** CORAL GABLES, FL 33133 US

**Title:** AST  
**Name:** CARLOS, THOMAS P  
**Address:** 90 EDGEWATER DRIVE #503  
**City-St-Zip:** CORAL GABLES, FL 33133

I hereby 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 all other like empowered.

**SIGNATURE:** THOMAS P CARLOS

AST

02/24/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date