

ANNUAL REPORT

DOCUMENT # P94000019001

1. Entity Name
IMAGE FACTORY PUBLISHING INC.Principal Place of Business
1500 SAN REMO AVE
STE 249
CORAL GABLES, FL 33146-3041Mailing Address
1500 SAN REMO AVE
STE 249
CORAL GABLES, FL 33146-3041**FILED**
Apr 26, 2004 08:00 AM
Secretary of State

04162004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE4. FEI Number
65-0493615
Applied For
Not Applicable
5. Certificate of Status Desired
\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

STEINGOLD, MARSHALL
1500 SAN REMO AVENUE
STE 249
CORAL GABLES, FL 33146**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, 2004 Fee will be \$550.009. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be**
Added to Fees000000128729
04/26/04-80050-007 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
STRUMP, WALTER
1500 SAN REMO AVE., STE 249
CORAL GABLES, FL 33146TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
V
STEINGOLD, MARSHALL
1500 SAN REMO AVE., STE 249
CORAL GABLES, FL 33146TITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Marshall Steingold