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03-11-1999 90117 024 ***150.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

 Corporation 	MENT # P94000 IM ENTERPRISES, INC.	083077					
Principal Place	e of Business	Mailing Address				.[8] 38188 (1103 680)	(8 3 11 1 1 9 8 1 1 9 9 1
4004 SW 64 AV	Æ	4004 SW 64 AVE			,		
DAVIE FL 33314 DAVIE FL 33314					DO NOT WRITE IN TH	HIS SPACE	
บร		US			3. Date Incorporated or Qualifed	113 OF AGE	
					11/09/1994		Ì
2 Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Ap	plied For
21		26			65-0535078	No	ot Applicable
Suite, Apt. i	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	1
22		27			5. Certificate of Status Desired	Fee Re	equired
City & State	e	City & State			6. Election Campaign Financing	\$5.00	
23		28			Trust Fund Contribution	Added t	to Fees
Zip	Country	Zip	Cou	ntry	8. This corporation owes the current year	Intangible Yes	□No
24	25	29	30		Personal Property Tax. 10. Name and Address of New Register		
	9. Name and Address of Curren	nt Registered Agent		81 Name	10. Name and Address of New Register	eu Agent	
NOR	191 TERR TH MIAMI BEACH FL 33160			83 84 City	poration submits this statement for the purpose	-L	Code
agent. I ai	m familiar with, and accept the obligation of th	nt and title if applicable.	NOTE: Registered	ites. Agent signature requil	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS		
12.		ID DIRECTORS	13.	<u> </u>	ADDITIONS/CHANGES TO OFFICERS	Change	Addition
TITLE	D OLCOMNELL WANDA N		1.1 ∏1 1.2 NA	j	•	_ sucrigo	
NAME	O'CONNELL, WANDA N 33† 191 TERR		•	REET ADDRESS		•	
STREET ADDRESS	NORTH MIAMI BEACH FL 3316	20		Y-ST-ZIP			ĺ
CITY-ST-ZIP	D	DELETI				Change	Addition
NAME	O'CONNELL, EDWARD A	<u></u>	2.2 NA				
STREET ADDRESS	COA AGA TERR			REET ADDRESS		-	Ì
CITY-ST-ZIP	NORTH MIAMI BEACH FL 3310	60		TY-ST-ZIP			
TITLE		☐ DELET				Change	☐ Addition
NAME			3.2 NA	ME			
STREET ADDRESS			3.3 ST	REET ADDRESS			
CITY-ST-ZIP			3.4. C	TY-ST-ZIP			
TITLE		☐ DELET	E 4.1 TF	1E		Change	☐ Addition
NAME			4. 2 N	AME			
STREET ADDRESS			4.3 ST	REET ADDRESS			
CITY-ST-ZIP				PY-ST-ZIP			☐ Addition
TITLE		☐ DELET				☐ Change	☐ Addition
NAME			52 N/				
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP		☐ DELET				Change	Addition
TITLE		[DCLL]	6.2 NA				
NAME				REET ADDRESS			

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: WANDA N. O'CONNEL!

CITY-ST-ZIP