FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P95000051233 (1)

IMPRIMATUR INC.

STREET ADDRESS

CITY-ST-ZIP

FILED
May 13 1997 8:00am
Secretary of State

21 26 65-0595107 Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Suite, Apt. #, etc. 6. Election Campaign Financing \$5.0	Applied For Not Applicable 5 Additional Required
W PALM BEACH FL 33401 PALM BEACH FL 33480-2888 3. Date Incorporated or Qualified 06/30/1995 05/30/1999 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0595107 Solte, Apt. #, etc. 5. Certificate of Status Desired 88.79 City & State City & State 6. Election Campaign Financing 55.0 23	Applied For Not Applicable 5 Additional Required
2. Principal Place of Business	Applied For Not Applicable 5 Additional Required
2. Principal Place of Business 2a. Mailing Address 4. FEI Number 25. Certificate of Status Desired 25. Certificate of Status Desired 26. Election Campaign Financing 27. Trust Fund Contribution 28. Trust Fund Contribution	Applied For Not Applicable 5 Additional Required
Suite, Apt. #, etc. Suite, Ap	5 Additional Required
22 City a State Ci	Required
23 Work Palm Books, PL 28 Trust Fund Contribution Adde	n
77	nd to Fees
24 SSAO 25 (a) LLL SQC(L/29 30 Florida Statutes Yes No	. 6. 199.002,
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	
HURT, J. M. III	
2433 S. FLAGLEP DRIVE 82 Street Address (P.O. Box Number is Not Acceptable)	
VIEST PALM BEACH FL 33401 Set. 36 SILL Brown Live Kol	.
83 tomat Boom Roads	
84 City 85 2	
84 City FL 85 \$	p Code
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above pamed corporation submits this statement for the purpose of changing	harvisinat at c
Office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment	as registered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	_
SIGNATURE	
Signature, typed or printed name of registered agent and talle if applicable (NOTE: Figg styred Agent signature required when reinstating) DATE	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE P DELETE 1.1 TITLE	e Addition
NAME HURT, JETHRO M III	
STREET ADDRESS 2433 SOUTH FLAGLER DRIVE CLARENCE 1.4 STREET ADDRESS 1881, 236 201 Brounderwine Ro	L٩
CITY-ST-ZIP W PALM BEACH PL 33401 14 CITY-ST-ZIP LOCK-BOLL CL 33	469
TITLE DELETE 21 TITLE Chang	e Addition
NAME 22 NAME	
STREET ADDRESS 2.3 STREET ADDRESS	
STREET ADDRESS 23 STREET ADDRESS CHY. ST. 700	
CITY-ST-ZIP 2 4 CITY-ST-ZIP	> Addition
CITY-ST-ZIP 2 d CITY-ST-ZIP TITLE □ DELETE 31 TITLE □ Chang	e Addition
CITY-ST-ZIP 2 # CITY-ST-ZIP TITLE DELETE 31 TITLE Chang NAME 32 NAME Chang	e Addition
CITY-ST-ZIP 2 # CITY-ST-ZIP TITLE DELETE 31 TITLE Chang NAME 32 NAME 32 STREFT ADDRESS	e Addition
CITY-ST-ZIP	
CITY-ST-ZIP	
CITY-ST-ZIP	
CITY-ST-ZIP	
CITY-ST-ZIP	e Addition

6.3 STREET ADDRESS

14. I do 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 eath; 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.