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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P95000077580 (5)

IMPERIA Principal Place	. MAINTENANCE AND	COATING COMPA		n		
325 PALM ST 325 PALM ST						
WINDERMERE FL 34786		WINDERMERE FL 34786			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified 10/05/1995	
2. Principal Place of Business		2a. Mailing Add	lress		4. FEI Number	Applied For
1		26			59-3345101	Not Applicable
Suite, Apt. #,	etc.	Suite, Apt. 1	I, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
3		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip		Country	8. This corporation owes or has paid the cur	
1	25	29	;	30		Yes No
	 Name and Address of Cu GLEN W 	rrent Registered Agent		B1 Name	10. Name and Address of New Registered	Agent
Pursuant to office or reg agent. I am SIGNATURE	the provisions of Sections 607 istered agent, or both, in the S familiar with, and accept the c	.0502 and 607.1508, Flor state of Florida Such cha hhligations of, Section 607	ida Statutes nge was au 2.0505, Flor	s, the above-named con althorized by the corpora ida Statutes.	poration submits this statement for the purpose of ation's board of directors. I hereby accept the app	85 Zip Code changing its registered ointment as registered
SIGNATURE	grature, typed or printed name of registion	d agent and title if applicable	(NOTE	Registered Agent signature requ	ered when reinstating) DATE	
12.	OFFICERS	AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND	
ITLE [P	μı	ELETE	1.1 TITLE		Change Addition
łame –	DUKE, GLEN W			1.2 NAME		
TREET ADDRESS	325 PALM ST			1.3 STREET ADDRESS		
ITY-ST-ZIP	WINDERMERE FL	 -		1.4 CITY - ST - ZIP		
ITLE		□ (ELETE	2.1 TITLE		☐ Change ☐ Addition
IAME				2.2 NAME		
TREET ADDRESS				2.3 STREET ADDRESS		
ITY - ST - ZIP			E. Fre	2.4 CITY-ST-ZIP		
ITLE		[]	ELETE	3.1 TITLE		☐ Change ☐ Addition
IAME)				3.2 NAME		
TREET ADDRESS				3 3 STREET ADDRESS		
CITY-ST-ZIP	 		£. £7£	3.4. CITY-ST-ZIP		
ITLE		П	ELETE	41 TITLE		Change Addition
NAME				4. 2 NAME		

6.4 CITY - ST - ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling 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.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST-ZIP

4.4 CITY-ST-ZIP

51 TITLE

52 NAME

6.1 TITLE

62 NAME

DELETE

☐ DELETE

SIGNATURE: GLEN W. DUKE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME

TITLE

NAME

770 518-6647

Change

Change

Addition

☐ Addition

FILED

Mar 24 1998 8:00am

Secretary of State