2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007
Secretary of State

DOCUMENT# P95000085422

Entity Name: IMPACT COMPUTERS AND ELECTRONICS, INC.

Current Principal Place of Business:

2021 COOLIDGE ST.
HOLLYWOOD, FL 33020

New Principal Place of Business:

Current Mailing Address:

2021 COOLIDGE ST.
HOLLYWOOD, FL 33020

New Mailing Address:

FEI Number: 65-0618530 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SALAUES, RAFAEL
5700 COLLINS AVENUE
APT 7D
MIAMI BEACH, FL 33140 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SALAUES, RAFAEL
Address: 5700 COLLINS AVENUE APT 7D
City-St-Zip: MIAMI BEACH, FL 33140

Title: VD ( ) Delete
Name: SALAUES, GABRIEL
Address: 5700 COLLINS AVENUE APT 7D
City-St-Zip: MIAMI BEACH, FL 33140

Title: TD ( ) Delete
Name: SALAUES, ORIETTA
Address: 5700 COLLINS AVENUE APT 7D
City-St-Zip: MIAMI BEACH, FL 33140

Title: SD ( ) Delete
Name: SALAVES, DANIELE
Address: 5700 COLLINS AVE APT 7D
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SALAUES, RAFAEL PD 04/27/2007

Electronic Signature of Signing Officer or Director — Date