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

PROFIT CORPORATION **ANNUAL REPORT**

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000100128 (3)

IMEX SYSTEMS CORPORATION

FILED Feb 26 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				r amatemat ism annen meter mater mater anter anter biffit	BEITE BEIDT TIGTO HEGT TEH HOET	
925 S.E. 20TH AVE		925 S.E. 20TH AVE.				
DEERFIELD BEACH FL 33441		DEERFIELD BEACH FL 33441		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	
					12/11/1996	
2. Principal Place of Business		2a. Mailing Address	ļ - -η		4. FEI Number	Applied For
21		26	4		65-0730020	Not Applicable
Suite, Apt #, etc		Suite, Apt. #, etc.	· · ·		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country		8. This corporation owes or has paid the	current year Intangible
24	25	20			Personal Property Tax due June 30. 🔀 Yes 🔲 No	
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Register	red Agent
	SEPHER, GLORIA ROA		81	Name		
	O PONCE DE LEON BLVD., SU	ITE 920	62	Street Add	ress (P.O. Box Number is Not Acceptable)	
CO	RAL GABLES FL 33441		83			
			84	City	1	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered						
office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Signature, lysed or printed rains of represent and tide if applicable. (NOTE Registered Agent signature required when reinstaling) DATE On the printed rains of representation of the printed agent and tide if applicable.						
12.	· · · · · · · · · · · · · · · · · · ·	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	
TITLE	PDT	DELETE	DELETE 1.1 TITLE			Change Addition
NAME	LEONG, TAN CHEE		1.2 NAME			
STREET ADDRESS	925 S.E. 20TH AVE.		1.3 STREET ADDRESS			
CITY - ST - ZIP	DEERFIELD BEACH FL 33441		1.4 C/TY - S	T-ZIP		
TITLE	SV	☐ DELETE	21 TITLE			Change Addition
NAME	LOM, PHUA AH		22 NAME		•	
STREET ADDRESS	925 S.E. 20TH AVE.		2 3 STREET ADDRESS			İ
CITY-ST-ZIP	DEERFIELD BEACH FL 3344		2. 4 City+St-ZiP			[] A. [] 1.488
TITLE		☐ DELETE	L			Change Addition
NAME			3 2 NAME			
STREET ADDRESS			3 3 STREET			
CITY-ST-ZIP TITLE			3.4. CITY-S 4.1 TITLE	51-ZIP		Change Addition
NAME		- Patent	4. 2 NAME			and another fine control
STREET ADDRESS			4.3 STREET	ADDRESS		ł
CITY-ST-ZIP			4.4 CiTY-S			
TITLE		DELETE				Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY - S	1 - ZIP		
TITLE		☐ DELETE	61 TITLE			☐ Change ☐ Addition
NAME		_	6.2 NAME			
STREET ADDRESS		/\	6.3 STREET	ADDRESS		
CITY+ST-ZIP			6 4 CITY - S			
14. I hereby c	ertily that the information supplied w	vith this fillura does not qualify.	for the exemp	tion stated in	i Section 119.07(3)(i), Florida Statutes. I furthe	or certify that the information

indicated on this annual report or supplemental annual op nt 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 list e 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

SIGNATURE: