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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700005219 (5)

IMPERIAL REAL ESTATE INC.

FILED Feb 18 1998 8:00am Secretary of State

Principal Place of Business Mailing Address -721 SE 17TH ST-- 721 SE 17TH 8T -FI LAUDERDALE FL 33316 FT LAUDERDALE FL 33316 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/17/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For TYLKA 0719 1927 45-26 Not Applicable Suite, Apt #, etc. Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State \$5.00 May Be 6. Election Campaign Financing HOLLY WOOD Hour 26 Trust Fund Contribution Added to Fees 23 Country 8. This corporation owes or has paid the current year Intangible Yes 25 29 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name MENARD, GILLES はんしょろ P.O. Box Number is Not Acceptable) -721-SE-17TH-ST 82 Street Address ( FT LAUDERDALE FL 33316 83 84 City Zip Code Hollywas D provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 with appl accept the obligations of, Section 607.0505, Florida Statutes. MANAND GillAS SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1 1 TITE MENARD, GILLES NAME 1.2 NAME 2238 N CYPRESS BEND DR. UNIT 701 STREET ADDRESS 1.3 STREET ADDRESS POMPANO BEACH FL 33069 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE 2.2 NAME NAME STREET ADORESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Addition 3.1 TITLE Change TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-S1-ZIP 3.4 CITY-ST-2IP DELETE Change \_\_ Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST- ZIP CITY-ST-ZIP Addition ☐ DELE1E Change 5.1 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELE 1E Change Addition 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

14. Thereby 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 this receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13d chapted or on in attachment with an address.

SIGNATURE:

Milesonal

GILLES

MARAND

2/12/98

R2E034 (10/97)