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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P97000049925 (5)

IMAGEERING, INC.

## **FILED** May 08 1998 8:00am Secretary of State

(30) 995-2267



Principal Place	or Business	Malling Address		
12472 SW 26TH STREET 12472 SW 26TH STREET MIAMI FL 33175 MIAMI FL 33175				
	•			DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				06/05/1997
	ace of Business	2a. Mailing Address	1000	4. FEI Number Applied For
21 1247	25W. 265treet	- 26 12472 Su	Costre	e T Not Applicable
Sulte, Apt. #	f. etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 AddItional Fee Required
City & State		City & State  28 Miami,	Morida	6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24 331			10 Dade	Personal Property Tax due June 30. 🔲 Yes 🔼 No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
CRUZ, RAMIRO 81 Name				
				Address (P.O. Box Number is Not Acceptable)
MIAMI FL 33175				
\$- <b>5</b> 15			83	
			84 City	85 Zip Code
			84 City	FL 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 typed or printed harrie of registored ager			required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D DATE DATED	["] nettit	1.1 TITLE	
NAME	CRUZ, RAMIRO		1.2 NAME	
STREET ADDRESS	12472 SW 26TH STREET		1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33175	T DELETE	1.4 CITY-ST-ZIP	The state of the s
TITLE	•	☐ DELETE	21 TITLE	Change L Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2. 4 CITY - ST - ZIP	
TITLE		☐ DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY - ST - ZIP	
TITLE		DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP	_		5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY - ST - ZIP	
14 I hereby c	ertify that the information supplied wi	th this filing does not qualify for	the exemption state	ed 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.				