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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARAMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000057527 (8)

IMPERIAL WARE CO., INC.

FILED Jun 08 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address				
5901 S.W. 74TH STREET SUITE 402 SOUTH MIAMI FL 33143		5901 S.W. 74TH STREET Suite 402 South Miami Fl 33143			DO NOT WRITE IN THIS SPACE	
SOUTH MIRM	1 FE 85145	SOUTH MINIMI TE SOTTO			3. Date Incorporated or Qualified	٦
					07/01/1997	
2. Principal Pr	lace of Business	2a. Mailing Address			4. FEI Number Applied For	
21		26			36 - 9076771 Not Applicable	<u>}</u>
Suite, Apt	#, etc.	Suite Apt. #, etc.			5. Certificate of Status Desired Sa.75 Additional	
22		(27)			Fee Required	-
City & State	9	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	[28] Zip	Cour	ntry	8. This corporation owes or has paid the current year.	طة
24	The second of th		30	,	Personal Property Tax due June 30. Yes No	Т
-31	9. Name and Address of Current				10. Name and Address of New Registered Agent	1
CO	VINGTON, ROBERT G			81 Name		
	1 S.W. 74TH STREET		-	82 Street A	ddress (P.O. Box Number is Not Acceptable)	-
	ITE 402			i		_
SO	UTH MIAMI FL 33143			83		
			ŀ	84 City	85 Zip Code	1
					FL July 1 to 1 t	
11. Pursuant to office or re	to the provisions of Section 607.0502 egistered agent, or both in the State	of Fiorida. Such ch <u>ange was a</u>	ultorized	Dy the com	corporation submits this statement for the purpose of changing its registered bration's board of directors. I hereby accept the appointment as registered	
Ι .	on tameliar with and a copt the other	Vons of Section 607 0505, Flo	moa Stati	nes	On 30/968	
SIGNATURE	Student typed popular have of regime and a re-	r or distribution (Mall)	ktegestered	Agent signature h	equired when reinstating) DATE	
12.	OFFICE BY AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12] <u> </u>
TITLE	D	DELLETE	1.100	LE	Change Addition) }
NAME	VALERI, XAVIER		1.2 NA	MF.		Š
STREET ADDRESS	13010 S.W. 133RD COURT		1.3 SH	REET ADORESS		Ļ
CITY-ST-ZIP	MIAMI FL 33186			Y - SI - ZIP	Change Addition	. }
THILE	D SALEDI ELIZABETU	LJ BUT	2.1 10			<u>'</u> `
NAME	VALERI, ELIZABETH 13010 S.W. 133RD COURT		2.2 NA			
STREET ADDRESS	MIAMI FL 33186			REET ADORESS TY-ST-ZIP		1
CITY-ST-ZIP TITLE	MIANII I L 33 100	DELETE	3.1 [1]		☐ Change ☐ Addition	1
NAME			3.2 NA			
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP			3.4. CI	TY+\$1+ZiP		
TITLE		☐ DELFTE	4.1 7(1	LE	Change Addition	1
NAME			4. 2 NA	MH		
STREET ADDRESS			4.3 S1	REET ADDRESS		
CITY-ST-ZIP				Y-ST-7IP		4
TITLE		☐ DETEAL	51 TII		Change Addition	1
NAME			52 NA			
STREET ADDRESS			4	REET ADDRESS		
CITY-ST-ZIP		DELETE		Y-SI-7IP	☐ Change ☐ Addition	\exists
TITLE		□ vittit	6 1 111 6 2 NA	1	900002552229 🗸	
NAME CARCET ADDRESS			6.2 NA	ME HELT ADDRESS	-06/09/9801018007 \\\	
STREET ADDRESS				Y-S1-ZIP	***150.00	
CITY-ST-ZIP			9401	1 01-11		\dashv

14. Thereby certify that the information supplied with this filing 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 logal 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 or an allochment with an address.