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Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000065542 (7)

1. Corporation Name
IMAGE HOLDINGS, INC.



Principal Place of Business
1901 NORTH ATLANTIC BLVD APT. 8A
FORT LAUDERDALE FL 33305

Mailing Address
1901 NORTH ATLANTIC BLVD APT. 8A
FORT LAUDERDALE FL 33305

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 3100 N. OCEAN BLVD.
Suite, Apt. #, etc.
22 1406
City & State
23 FORT LAUDERDALE
Zip
24 33308 Country
25 U.S.A.

2a. Mailing Address
26 3100 N. OCEAN BLVD
Suite, Apt. #, etc.
27 1406
City & State
28 FORT LAUDERDALE
Zip
29 33308 Country
30 U.S.A.

3. Date Incorporated or Qualified
07/29/1997

4. FEI Number
Applied For
☒ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

8. Name and Address of Current Registered Agent

M & W AGENTS, INC.
2101 CORPORATE BLVD SUITE 216
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 FL 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 name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME D CHAVES, ROBERT A ESO
STREET ADDRESS 2101 CORPORATE BLVD SUITE 216
CITY-ST-ZIP BOCA RATON FL 33431

TITLE
NAME PRESIDENT
STREET ADDRESS LAWRENCE TORIAS HUGHES
CITY-ST-ZIP 3100 N. OCEAN BLVD #1406
FT. LAUDERDALE, FL 33308

TITLE
NAME SECRETARY
STREET ADDRESS MARY ELIANA HUGHES
CITY-ST-ZIP 3100 N. OCEAN BLVD #1406
FT. LAUDERDALE FL 33308

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this report 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 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.

SIGNATURE

3/16/98

CR2E034 (10/97)