

FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000020690 1. Corporation Name

IMAGE MAKERS INTERNATIONAL, INC.

3900 ST. STREET NO.

SUITE

Principal Place of Business

Mailing Address

2a. Mailing Address

26

27

3900

200

City & State)

Suite, Apt. #, etc

1927 - 34TH STREET NORTH ST. PETERSBURG FL 33713

2. Principal Place of Business

200

City & State

1927 - 34TH STREET NORTH ST. PETERSBURG FL 33713

## May 04, 1999 8:00 am Secretary of State

05-04-1999 90140 006 \*\*\*158.75



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

6. Election Campaign Financing

03/04/1998

FEI Number

23 54.1	ETERS DUVG	. F1	28 57 .	PETE	RSOU	ir6	<u> </u>	1	Trust Fund C	Contribution		Added to	o Fees
Zip	Countr	ý '	Zip		_ Co	untry	_		•		e current year Inta	_	
24 3370	3 25 P	NELLA.	5 29 33 7	<u>(いつ</u>	30	<u> </u>	<u>1611</u>	<u> </u>	Personal Pro			∐ Yes	No
	9. Name and Addre	ss of Current	Registered A	gent		<b>-</b>			10. Name and A	Address of N	lew Registered	Agent	
~.D						81	Name						
EARLE, RICHARD T III						82	Street	Addres	s (P.O. Box Num	ber is Not Ac	cceptable)		
111 2ND AVENUE NORTHEAST									`				
	E 1401					83							
SI. F	Petersburg FL 33	701				84	City		<del></del>	-		85 Zip (	Code
							•				FL		
office or re	to the provisions of Sec egistered agent, or both	in the State o	of Florida, Such	i change was i	authorize	ea ov t	named	corporation	ation submits this	statement for	or the purpose of accept the appoil	changing its itment as re	registered gistered
agent. I a	m familiar with, and acc	ept the obligati	ions of, Section	1 607.0505, FI	lorida Sta	tutes.							
SIGNATURE	Signature, typed or printed name	e of registered agent	t and title if applicable	в. (NO <sup>1</sup>	ΓΕ: Registere	d Agent	signature r	equired w	hen reinstating)		DATE		
12.		_	D DIRECTORS		13.						O OFFICERS AN		
TITLE				DELETE	1.1 1	NTLE		71	esident	. ~		☐ Change	☐ Addition
NAME					1.2 N	NAME		50	ZANNE	E - 7	LIGGINS		
STREET ADDRESS					1.3 9	STREET	ADDRESS	102	9 42 nd	,AYE	. N.E		
CITY-ST-ZIP					1.4 0	CITY-ST-	ZIP	<u>ن</u>	PETERS	DUB.	F1. 33		
TITLE				DELETE	2.1 1	TITLE						Change	☐ Addition
NAME .					221	NAME							
STREET ADDRESS					2.3 9	STREET	ADDRESS						
CITY-ST-ZIP					2.4	CITY-ST	-ZIP						
TITLE		_		□ DELETE	3.1 1	TITLE			•			Change	Addition
NAME					3.2 N	VAME							
STREET ADDRESS					3.3 9	STREET	ADDRESS	Ì					
CITY-ST-ZIP					3.4.	CITY-ST	-ZIP						
TITLE		_		DELETE	4.11	TITLE				•		Change	☐ Addition
NAME					4.2	NAME		ĺ					
STREET ADDRESS					4.3 9	STREET.	ADDRESS						
CITY-ST-ZIP					4.4 (	CITY-ST	ZIP						
TITLE		_		DELETE	5.1	TITLE				. —		Change	☐ Addition
NAME					5.21	NAME							
STREET ADDRESS					5.3 \$	STREET	address						
CITY-ST-ZIP					5.4 (	CITY-ST	-ZiP						
TITLE		-u		DELETE	6.1	TITLE						Change	☐ Addition
NAME					6.2 (	NAME							
STREET ADDRESS					6.3	STREET.	ADDRESS	1					
CITY, ST. 7IP						CITY-ST							_
44 1 5 5 5 5 5 5	ertify that the information	on supplied wit	th this filing doe	s not qualify	for the ex	emptio	n state	in Se	ction 119.07(3)(i)	, Florida Stat	utes. I further cer	tify that the i	nformation
:-d:t-d	on this annual report or director of the corporati	r cunniamental	annual report i	ie tale and aci	curate an	d that	my sian	ature 9	shall have the sar	ne legal errec	a as ir made unot	er vaul, mat	i aiii aii

STREET NO

officer or director of the corporation or the Block 12 or Block 13 jf-changed, or on an

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Not Applicable

■ 14