

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000098027

**FILED
Aug 31, 2007
Secretary of State**

Entity Name: IMAROSE, INCORPORATED

Current Principal Place of Business:

P.O. BOX 172903
MIAMI LAKES, FL 33017

New Principal Place of Business:

14050 NW 22 AVE
OPALOCKA, FL 33054

Current Mailing Address:

P.O. BOX 172903
MIAMI LAKES, FL 33017

New Mailing Address:

FEI Number: 65-0877753 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSE, DEBRA ESQ.
1221 BRICKELL AVE., STE.900
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROSE, MAXWELL
Address: PO BOX 172903
City-St-Zip: MIAMI, FL 33017

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROSE, MAXWELL

P

08/31/2007

Electronic Signature of Signing Officer or Director

_____ Date