2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000031219

Entity Name: IMAGEN 3000, INC.

FILED Feb 09, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6955 NW 77 AVE 10491 N KENDALL DR SUITE 309 SUITE F 202 MIAMI, FL 33166 MIAMI, FL 33176 US

Current Mailing Address: New Mailing Address:

6955 NW 77 AVE 10491 N KENDALL DR SUITE 309 SUITE F 202 MIAMI, FL 33166 MIAMI, FL 33176 US

FEI Number: 65-0908441 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 LOGORZ, ANTONIO E
 LOGORZ, ANTONIO E

 6955 NW 77 AVE
 10491 N KENDALL DR

 SUITE 309
 SUITE F 202

 MIAMI, FL 33166 US
 MIAMI, FL 33176 US

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: ANTONIO E LOGORZ 02/09/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition LOGORZ, ANTONIO E LOGORZ, ANTONIO E Name: Name: 10675 SW 76 TER 9321 SW 52 TERRACE Address: Address: City-St-Zip: MIAMI, FL 33173 City-St-Zip: MIAMI, FL 33165 US

Title: VD () Delete Title: VD (X) Change () Addition
Name: LOGORZ BARBARA M Name: CABRERA GUILLERMO

 Name:
 LOGORZ, BARBARA M
 Name:
 CABRERA, GUILLERMO

 Address:
 10675 SW 76 TER
 Address:
 9321 SW 52 TERRACE

 City-St-Zip:
 MIAMI, FL 33173
 City-St-Zip:
 MIAMI, FL 33165 US

Title: SD (X) Delete Title: () Change () Addition

 Name:
 CABRERA, GUILLERMO
 Name:

 Address:
 10675 SW 76 TER
 Address:

 City-St-Zip:
 MIAMI, FL 33173
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ANTONIO E LOGORZ PD 02/09/2007