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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # S05402

(0)

IMPOSSIBLE IMAGES, INC.

May 05 1997 8:00am

Secretary of State

12153 SW 131 MIAMI FL 3318 US	AVE	12153 SW 131 AVE MIAMI FL 33186-6472 US		3. Date Incorporated or Qualified 10/08/1990	3a. Date of Last Report 04/23/1996	
11/2 .	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
	IARD COURT		48 COUR	7 65-0229580	Not Applicable	
Suite, Apt. :		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State 23 Lakewood, CO		ENTY ENTY, I-L		Election Campaign Financing Trust Fund Contribution		
24 FOZZ		29 33330	Country 30 (45/4)		Yes No	
	9. Name and Address of Current I	10. Name and Address of New Re	10. Name and Address of New Registered Agent			
1306	IRQUE, JAMES C. 38 SW 108TH ST. MI FL 33186		81 Name 82 Street 83 84 City	GARY D. MORSE Address, (P.O. Box Number is Not Acceptable) OPPER CITY.	EY PRT	
11. Pursuant to office or reagent. Lar	to the provisions of Sections 607.0502 agistered agent, or both, in the State of marginar with, and accopt the obligati	and 607,1508, Florida Statuto Florida Such change was a ons of, Section 607,0505, Flo	es, the above-named uthorized by the corrida Statutes.	corporation submits this statement for the p poration's board of directors. I hereby accep	urpose of changing its registered it the appointment as registered	
SIGNATURE ,	Signature, typed or printed name of registered agoy	And title if applicable. (NOTE	Registered Agent signature	54 6 Y 5/ n required which reinstating)) 3/9/ DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12	
TITLE	D BOURDOUSE MARKS OUDIOTIAN	☐ DELETE	1.1 TITLE		Change Addition	
NAME	BOURQUE, JAMES CHRISTIAN		1.2 NAME			
STREET ADDRESS	13068 SW 108 ST		1.3 \$1REF1 ADDRESS	141 WARD COURT		
CITY-ST-ZIP	MIAMI FL		1.4 C/TY - ST - 7/P	LAICEWOOD, CO 802		
TITLE		L DELETE	2.1 Trill#	·	☐ Change ☐ Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP		DELETE	2. 4 CHY-S1-ZIP		Change	
TITLE		בן שננונ	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4. C(1) Y · S1 - Z(P) 4.1 THTLE		Change Addition	
NAME		C) piccie	4.1 RILE 4.2 NAME		Fi Aumilia Fil Edhillia	
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition	
NAME		_	5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE		DELFTE	6.1 TITLE		Change Addition	
NAME		<u> </u>	6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 C(1Y - ST - 7)P			
14. i do hereb	by certify that the information supplied v	with this filing does not qualif	v for the exemption s	.l slated in Section 119 07(3)(i), Florida Statutes	s. I further certify that the	
information I am an of	n indicated on this annual report or sur	oplemental annual report is tr de receiver or trustee empow	ue and accurate and pred to execute this	d that my signature shall have the same loga report as required by Chapter 607, Florida S	l effect as if made under oath; that	

4/24/97

303/914 0208