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

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATI

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # \$16343

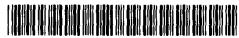
(3)

Corporation Name

IMPERIAL MANUFACTURING INC.

		•

FILED Mar 19 1997 8:00am Secretary of State



Little Charles Control Control Control		Maining Address							
C/O ALLAN SALOVIN 777 SOUTH FLAGLER DRIVE. SUITE 310-EAST WEST PALM BEACH FL 33401		C/O ALLAN SALOVIN 777 SOUTH FLAGLER DRIVE, SUITE 310-EAST WEST PALM BEACH FL 33401-6161							
					 Date Incorporated or Qualified 12/05/1990 		Date of Last Report 5/01/1996		
2. Principal Place of Business		2a. Mailing Address		4. FEI Number			plied For		
[21]		26		65-0251336	Not Applicable				
Suite, Apit n		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$	8,75 A Fee Re		
City & State 23		City & State		Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees			
74) 24	Country Zip Country 25 29 30			у	8. This corporation has liability for intangible tal under s. 199 032, Florida Statutes				
	9. Name and Address of Curre		173.1		10. Name and Address of New Re		ni		
SAL	OVIN. ALLAN		8	Name					
777 C ELAGLED DONE CHITE 210E				82 Street Address (P.O. Box Number is Not Acceptable)					
1163	I FALM DEAULI FL 33401		8	3				-,,, <u>-,,</u>	
_			8	City		FI B	i š Zip C	Zode	
11. Pursuant to	o the provisions of Sections 607.05	02 and 607.1508, Florida Statu	tes, the abo	ve-named o	corporation submits this statement for the poration's board of directors. I hereby accept	urpose of cha	anging its	s registered	
agent La:	is familiar with, and accept the oblig	pations of Section 607.0505, F	lorida Statut	es	station a board of officiols. Thereby accept	т ито цррони	non as	- Cgraterou	
SIGNATURÈ							·		
12.	ejnat ar itgae list parte flaatae (direct) e dife. ON CINCLOC AN	ID DIRECTORS	13.	gent signature r	equired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE DIE	OCCTOR	C IAL 40	
10t.F	OPT	DELETE	1 1 THLE		ADDITIONS/CHANGES TO OFFIC		Change	Addition	
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NAME	SALOVIN, ALLAN		22 NAMÉ	- 1					
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N.327F			6.2 NAME	[
STREET ACCORE &			6 3 STREE	T AUDRESS					
GHY-51-20			6.4 CITY	\$1-7IP					
34. I do hereb	y ceru'y that the information supplic	id with this tiling does not qual	ty for the ex	emption sta	ated in Section 119.07(3)(i), Florida Statutes	 I further cer 	tify that t	he	

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 it made under oath; that Lam an officer or director of this 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 one a attack then with an address.

SIGNATURE:

ATURE AND TYPEO OF PINISHED NAME OF SIGNING OFFICER OR DIRECT

LEN

CP-06-03

407-6259470

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