

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# V24109

Entity Name: IMPERIAL MEATS, INC.

FILED
Jan 11, 2006
Secretary of State

Current Principal Place of Business:

2215 N.W. 26 AVE.
MIAMI, FL 33142 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 420059
MIAMI, FL 33142 US

New Mailing Address:

FEI Number: 65-0391739 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VALDES, CATHERINE
2215 N.W. 26 AVENUE
MIAMI, FL 33142 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VALDES, ROGELIO A
Address: 2215 N.W. 26 AVENUE
City-St-Zip: MIAMI, FL 33142 US

Title: S () Delete
Name: VALDES, CATHERINE
Address: 2215 N.W. 26 AVENUE
City-St-Zip: MIAMI, FL 33142 US

Title: T () Delete
Name: VALDES, CATHERINE
Address: 2215 N.W. 26 AVENUE
City-St-Zip: MIAMI, FL 33142 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: () Change () Addition
Name:
Address:
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: CATHERINE VALDES

S/T

01/11/2006

Electronic Signature of Signing Officer or Director

Date