2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V51979

FILED Jan 09, 2006 Secretary of State

Entity Name: IMPERIAL PACKERS & PURVEYORS INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:		
1430 E MOWR 102	Y DRIVE				
HOMESTEAD,	FL 33033	US			
Current Mailing Address:		New Mailing Address	New Mailing Address:		
PO BOX 90094 HOMESTEAD,		US			
FEI Number: 65-0)346138 I	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
LABAUVE, CAF PO BOX 90094 HOMESTEAD,	10	US			
PO BOX 90094 HOMESTEAD, The above nam	40 FL 33090 ned entity sub		rpose of changing its registere	d office or registered agent, or both,	
PO BOX 90094 HOMESTEAD, The above nam n the State of F	40 FL 33090 ned entity sub		rpose of changing its registere	d office or registered agent, or both,	
PO BOX 90094 HOMESTEAD, The above nam in the State of F	10 FL 33090 ned entity sub Florida.			d office or registered agent, or both, Date	
PO BOX 90094 HOMESTEAD, The above nam n the State of F SIGNATURE:	10 FL 33090 ned entity subflorida. Electronic	mits this statement for the pur			
PO BOX 90094 HOMESTEAD, The above nam In the State of F SIGNATURE:	FL 33090 The substitution of the substitution	omits this statement for the pure statement for the pure Signature of Registered Agent ust Fund Contribution ().	t		
PO BOX 90094 HOMESTEAD, The above nam in the State of F SIGNATURE: Election Campaig OFFICERS AN Title: PD Name: IMF Address: PO	HO FL 33090 med entity subflorida. Electronic gn Financing Tr ND DIRECTO	Signature of Registered Agentust Fund Contribution (). RS: lete RS AND, PURVEYORS, IN C .	t	Date	

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: ROBERT CUIK VP 01/09/2006