

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000116317

Entity Name: IMCP LLC

Current Principal Place of Business:

ATTN: CECILIA POVEDA
1111 SW 1ST AVE. PH 119
MIAMI, FL 33130

Current Mailing Address:

ATTN: CECILIA POVEDA
1111 SW 1ST AVE. PH 119
MIAMI, FL 33130

FEI Number: 46-1248577

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

POVEDA, CECILIA
1111 SW 1ST AVE. PH119
MIAMI, FL 33130 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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGRM
Name POVEDA, MONICA P
Address 1550 BRICKELL AVE.
APT. A501
City-State-Zip: MIAMI FL 33129

Title MGRM
Name POVEDA, CECILIA
Address 1111 SW 1ST AVE. PH 119
City-State-Zip: MIAMI FL 33130

I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MONICA P. POVEDA

MANAGER

03/19/2014

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date