2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000003512

Entity Name: IDEAL IMAGE DEVELOPMENT (DELAWARE), INC.

FILED Apr 19, 2018 Secretary of State CC7029077713

Current Principal Place of Business:

ONE NORTH DALE MABRY HIGHWAY **SUITE 1200**

TAMPA, FL 33609

Current Mailing Address:

ONE NORTH DALE MABRY HIGHWAY **SUITE 1200**

TAMPA, FL 33609 US

FEI Number: 20-4852227 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STROTHMAN, NICOLE D 4830 W KENNEDY BLVD. STE 440

TAMPA, FL 33609 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

Officer/Director Detail:

Title CHAIRMAN, DIRECTOR Title EXECUTIVE VP, COO, CFO,

DIRECTOR

Name FLUXMAN, LEONARD LAZARUS, STEPHEN Name Address

ONE NORTH DALE MABRY HIGHWAY Address ONE NORTH DALE MABRY HIGHWAY **SUITE 1200**

SUITE 1200 TAMPA FL 33609

City-State-Zip: City-State-Zip: TAMPA FL 33609

Title **DIRECTOR**

Title VP, CHIEF ACCOUNTING OFFICER Name BOEHM, ROBERT

Name LAZAR, ROB Address

ONE NORTH DALE MABRY HIGHWAY Address ONE NORTH DALE MABRY HIGHWAY **SUITE 1200**

SUITE 1200

City-State-Zip: **TAMPA FL 33609** City-State-Zip: TAMPA FL 33609

Title GENERAL COUNSEL, ASSISTANT Title CFO/CAO

SECRETARY Name STROTHMAN, NICOLE Name KLINGER LAZARUS, LISA

Address ONE NORTH DALE MABRY HIGHWAY Address ONE NORTH DALE MABRY HIGHWAY

SUITE 1200 SUITE 1200

TAMPA FL 33609 TAMPA FL 33609 City-State-Zip: City-State-Zip:

Title COO Title CEO

BARRETT FLUXMAN, CHRIS PROKUPEK ELLINGER, DAVE Name Name

ONE NORTH DALE MABRY HIGHWAY Address ONE NORTH DALE MABRY HIGHWAY Address

SUITE 1200 SUITE 1200

City-State-Zip: TAMPA FL 33609 City-State-Zip: TAMPA FL 33609

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 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 all other like empowered.

SIGNATURE: PROKUPEK ELLINGER, DAVE PRESIDENT, DIANE 04/19/2018

CHICHESTER, ATTORNEY-IN-FACT