

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 19, 2001 8:00 am
Secretary of State

03-19-2001 90472 015 ***150.00

DOCUMENT # F96000002217

1. Entity Name

ICON INTERNATIONAL HOLDINGS, INC.

Principal Place of Business

**4800 RIVERSIDE DRIVE
 SUITE 200
 PALM BEACH GARDENS FL 33410**

Mailing Address

**4800 RIVERSIDE DRIVE
 SUITE 200
 PALM BEACH GARDENS FL 33410**

2. Principal Place of Business

767 3rd Ave., 27th Fl.

3. Mailing Address

767 3rd Ave., 27th Fl.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

New York, NY

City & State

New York, NY

4. FEI Number

65-0655379

Applied For

Not Applicable

Zip

10017

Country

USA

Zip

10017

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**WANDT, RONALD
 4800 RIVERSIDE DRIVE
 SUITE 200
 PALM BEACH GARDENS FL 33410**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

[Signature]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-21-01

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
 NAME **MUSIOL, KARL G**
 STREET ADDRESS **THUMENBERGER WEG 2, D-90491**
 CITY-ST-ZIP **NURNBERG, GERMANY**

TITLE **V** ☐ Delete
 NAME **ANDRESEN, THOMAS DR**
 STREET ADDRESS **THUMENBERGER WEG 2, D-90491**
 CITY-ST-ZIP **NURNBERG, GERMANY**

TITLE **S** ☐ Delete
 NAME **MUZINGER, UWE**
 STREET ADDRESS **4800 RIVERSIDE DRIVE**
 CITY-ST-ZIP **PALM BEACH GARDENS FL 33410**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
 NAME **S**
 STREET ADDRESS **MUZINGER, UWE**
 CITY-ST-ZIP **10 SOUTH RIDGE ROAD
 LARCHMONT, NY 10538**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-21-01 212-7512244

CR2E034 (10/00)