

65. FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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97 SEP 25 PM 1:26

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name
107476
ICA Enterprises, Inc.

Principal Place of Business Mailing Address
16600 NW 1 Street ← Same
Pembroke Pines, FL 33028

21	2. Principal Place of Business	26	2a. Mailing Address
22	Suite, Apt. #, etc	27	Suite, Apt. #, etc.
23	City & State	28	City & State
24	Zip	29	Zip
	Country	30	Country

3.	Date Incorporated or Qualified	3a.	Date of Last Report
	8/4/89		
4.	FBI Number	Applied For	Not Applicable
	65-0181218		
5.	Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required
6.	Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>	\$5.00 May Be Added to Fees
8.	This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent
Raguel Gonzalez
16600 NW 1 Street
Pembroke Pines, FL 33028

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-appointing) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	Director	<input type="checkbox"/> DELETE
NAME	Julio M. Gonzalez	
STREET ADDRESS	16600 N.W. 1 Street	
CITY-ST-ZIP	Pembroke Pines, FL 33028	
TITLE	Director	<input type="checkbox"/> DELETE
NAME	Raguel Gonzalez	
STREET ADDRESS	16600 N.W. 1 Street	
CITY-ST-ZIP	Pembroke Pines, FL 33028	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

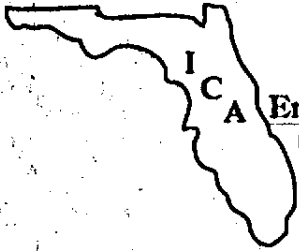
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	700002305947--2
1.3 STREET ADDRESS	-09/29/97--01188--007
1.4 CITY-ST-ZIP	****165.00 ****165.00
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Raguel Gonzalez, Raguel Gonzalez 4/24/97 454 433-9353

9c 9-26-97



ICA Enterprises Inc.

RESIDENTIAL & COMMERCIAL ALARMS

STATE LICENSED & INSURED

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September 15, 1997

Annual Reports Filings
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Dear Department of State:

Enclose I am resubmitting my Annual Report for 1997 which apparently got lost in the mail or in the paperwork. My Accountant advised me that the check made out to your office was still outstanding and when I called your office neither my Annual Report nor my check was noted as being filed.

Please allow me to resubmitted my Annual Report at this time.

Copy of the Annual Report is enclosed and has been resigned.

Thank you very much for your cooperation in this matter.

Would you also be so kind as to fax a Detail Record as soon as you file this Annual Report to (954) 433-9353.

Very truly yours,

RAQUEL GONZALEZ
Director