

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 251933

Entity Name: I.C.Y. INC.

FILED
Mar 23, 2003
Secretary of State

Current Principal Place of Business:

825 ARTHUR GODFREY ROAD
MIAMI, FL 33140

New Principal Place of Business:

825 ARTHUR GODFREY ROAD
MIAMI BEACH, FL 33140 US

Current Mailing Address:

825 ARTHUR GODFREY ROAD
MIAMI, FL 33140

New Mailing Address:

825 ARTHUR GODFREY ROAD
MIAMI BEACH, FL 33140 US

FEI Number: 59-0976824

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CYPEN, IRVING
825 ARTHUR GODFREY RD
MIAMI BEACH, FL 33140

Name and Address of New Registered Agent:

CYPEN, STEPHEN H
825 ARTHUR GODFREY RD
MIAMI BEACH, FL 33140 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: STEPHEN H. CYPEN

03/23/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CYPEN, BENJAMIN,
Address: 1001 SW 141 AVE
City-St-Zip: PEMBROKE PINES, FL

Title: V () Delete
Name: CYPEN, IRVING
Address: 320 W. DI LIDO
City-St-Zip: MIAMI BEACH, FL

Title: S () Delete
Name: CYPEN, HAZEL,
Address: 320 W. DI LIDO
City-St-Zip: MIAMI BEACH, FL

Title: D (X) Delete
Name: CYPEN, IRVING,
Address: 320 W. DI LIDO
City-St-Zip: MIAMI BEACH, FL

Title: D (X) Delete
Name: CYPEN, MILDRED,
Address: 1001 SW 141ST AVE
City-St-Zip: PAMBROKE PINES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: CYPEN, WAYNE A
Address: 4800 N BAY RD
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: VSD (X) Change () Addition
Name: CYPEN, STEPHEN H
Address: 5500 COLLINS AVE
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: D (X) Change () Addition
Name: CYPEN, HAZEL A
Address: 320 W. DI LIDO
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: WAYNE A. CYPEN

PTD

03/23/2003

Electronic Signature of Signing Officer or Director

Date