

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

6/18/00

DOCUMENT # A92000000291

1. Entity Name
ACCURATE INFO, LTD.

00 APR -3 AM 10:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

my 4/1/00

Principal Place of Business
~~0/0 ICH CORP.~~
1801 SOUTH FEDERAL HIGHWAY, SUITE 300
DELRAY BEACH FL 33483

Mailing Address
~~C/O ICH CORP.~~
1801 SOUTH FEDERAL HIGHWAY, SUITE 300
DELRAY BEACH FL 33483-3335



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 65-0384330		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
ICH CORPORATION 1801 SOUTH FEDERAL HIGHWAY SUITE 300 DELRAY BEACH FL 33483		Name: Accufon Corp Street Address (P.O. Box Number is Not Acceptable): 1801 S. Federal Hwy Suite 300 City: Delray Beach FL Zip Code: 33483	

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: Eric Cherry DATE: 3/29/00

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions as Shown on record. \$7,250,000.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	F99000001119	STREET ADDRESS	
NAME	ACCUFON CORP.	CITY - ST - ZIP	
STREET ADDRESS	1801 SOUTH FEDERAL HIGHWAY, SUITE 300		
CITY - ST - ZIP	DELRAY BEACH FL 33483		
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS			000003213930--5
CITY - ST - ZIP			-04/19/00--01015--005
DOCUMENT #		STREET ADDRESS	
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DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS			
CITY - ST - ZIP			

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: Eric Cherry 3/29/00 561-272-5267

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (9/99)