

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F85446 (5)

1. Corporation Name

INTERNATIONAL COMPONENTS, INC.



Principal Place of Business

510 VONDERBURG DR.
SUITE 3000
BRANDON FL 33511
US

Mailing Address

510 VONDERBURG DR.
SUITE 3000
BRANDON FL 33511
US

2. Principal Place of Business

2a. Mailing Address

1 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

2 City & State

27 City & State

Zip Country
25

Zip Country
28 29 30

3. Date Incorporated or Qualified

06/15/1982

3a. Date of Last Report

05/01/1995

4. FEI Number

13-3577065

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LABONTE, LORRAINE
510 VONDERBURG DR.
SUITE 3000
BRANDON FL 33511

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

ADDRESS	1-7 ZIP	8
PD PETER, LESLIE E 510 VONDERBURG DR. BRANDON, FL 00000		<input type="checkbox"/> DELETE
V SCHNEIDER, HERBERT 510 VONDERBURG DR. BRANDON FL		<input type="checkbox"/> DELETE
		<input type="checkbox"/> DELETE
		<input type="checkbox"/> DELETE
		<input type="checkbox"/> DELETE
		<input type="checkbox"/> DELETE

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP

Change	Addition
<input type="checkbox"/>	<input type="checkbox"/>
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***200.00

5/4/96

I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

NATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/96

813-685-0891

Date

Daytime Phone #

CR2E034 (12/95)