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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # F9600001407 (3)

INTERNATIONAL CAPITAL PARTNERS, INC.

Principal Place of Business

Mailing Address

FILED May 02 1997 8:00am Secretary of State



11601 4TH ST N. #204 ST PETERSBURG FL 33716		11801 4TH ST N. #204 ST PETERSBURG FL 33716-2735					
					3. Date Incorporated or Qualified 03/19/1996	3a. Date of Las	t Report
	lace of Business	2a. Mailing Address 26 4844 West	6.1	01/	4. FEI Number 59-3342031		Applied For
21 4844 Suite, Apt.		26 4844 Vest Suite, Apt. #, etc.	Gandy	DIVO.	09/0042001	- 60 7	Not Applicable 5 Additional
22		27			5. Certificate of Status Desired		Required
City & Stat 23 Tamp	a. Florida		Florid		Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees
24 3361 1		29 336 11	30 Hills	borough	8. This corporation has liability for it Florida Statutes 10. Name and Address of New Re	Yes No	r s. 199.032,
DAG	9. Name and Address of Current AN STEVEN A	Hegistered Agent	B1		4 0	disteled Agent	
RAGAN, STEVEN A 11601 4TH ST N., #204				82 Street Address (P.O. Box Number is in the Acceptable)			
ST PETERSBURG FL 33716				4844	West Carter B Ve	()	
			83	3			
			84			85 <u>Z</u>	ip Code
11 Purevant	to the provisions of Sections 607.0502	and 607 1508 Florida Statut	toe the above	IOM	poration submits this statement for the p	FL 3	36 H
office or r	registered agent, or both, in the State of	of Florida Such change was a	authorized b	by the corporat	tion's board of directors. I hereby accep	t the appointment	as registered
	an familial with, and accept the obligation	IONS G. SECTION 607,0303, FIX	Dassidie	Best -			
SIGNATURE	Styruthire, typod or printed name of registered agen		E: Registered A	gent signature requir	red when reinstating)	DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	PDC RAGAN, STEVEN A	☐ DELETE	1.1 TITLE	ſ		Chang	ge 🔲 Addition
NAME STREET ADDRESS	11601 4TH ST N., #204		1.2 NAME	Į.			
CITY - ST - ZIP	ST PETERSBURG FL 33716		1.4 CITY-	ET ADDRESS			
Title		DELETE	2.1 TITLE			Chang	ge Addition
NAME			2.2 NAME	: [
STREET ADDRESS			2.3 STREE	T ADDRESS			
CiTY-ST-ZiP			2. 4 CITY				
TOTLE		DELETE	3.1 TITLE	- 1		Chang	ge L Addition
NAME	•		3.2 NAME				
STREET ADDRESS			1	ET ADDRESS			
CHY-SI-ZIP THEE		DELETE	3.4. City			Chang	ge
NAME			4 2 NAM	1			
STREET ADDRESS				ET ADORESS	•		
City-SI-729			4.4 CITY-	ST-ZIP			·
14()		DELETE.	5.1 TITLE			Chang	ge 🔲 Addition
NAME			5.2 NAME		•		
STREET ADDRESS				T ADDRESS			
CITY - ST - 7IP		DELETE	5.4 CITY-			Chan	Addition
TILE		☐ DELETE	6.1 TITLE	1		Chang	ge Addition
NAME STREET ADDRESS			6.2 NAME	ET ADDRESS	:		
City-St-Zip			6.4 CITY		•		
OHIT-O-"ZIF			0.4 0111 1	01.511			

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 chapted, or on an attachment with an address.

SIGNATURE:

ANATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/97 (813) 835-1339