

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000001668

1. Entity Name

ICP MIAMI II CORP.

FILED
Mar 06, 2000 8:00 am
Secretary of State

03-06-2000 90104 015 ***158.75

819036



DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
C/O FORTIS, INC. ATTN: JOHN F. SHEEHAN C/O FORTIS, INC. ATTN: JOHN F. SHEEHAN
ONE CHASE MANHATTAN PLAZA ONE CHASE MANHATTAN PLAZA
NEW YORK NY 10005 NEW YORK NY 10005-1401

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

13-3886981

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)



FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.



\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME BRINKERHOFF, JAMES J
STREET ADDRESS ONE CHASE MANHATTAN PLAZA
CITY-ST-ZIP NEW YORK NY

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Zip: 10005

☐ Change ☐ Addition

TITLE VP
NAME TEEL, JR N
STREET ADDRESS ONE CHASE MANHATTAN PLAZA
CITY-ST-ZIP NEW YORK NY

☒ Delete

TITLE VP
NAME William R. Bintzer
STREET ADDRESS One Chase Manhattan Plaza
CITY-ST-ZIP New York NY 10005

☐ Change ☐ Addition

TITLE D
NAME FREEDMAN, ALLEN R
STREET ADDRESS ONE CHASE MANHATTAN PLAZA
CITY-ST-ZIP NEW YORK NY

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Zip: 10005

☐ Change ☐ Addition

TITLE D
NAME CLAYTON, KERRY
STREET ADDRESS ONE CHASE MANHATTAN PLAZA
CITY-ST-ZIP NEW YORK NY

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Zip: 10005

☐ Change ☐ Addition

TITLE T
NAME HEGE, BARBARA
STREET ADDRESS ONE CHASE MANHATTAN PLAZA
CITY-ST-ZIP NEW YORK NY

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Zip: 10005

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE ~~Assistant Secretary~~ Secretary
NAME John F. Sheehan
STREET ADDRESS One Chase Manhattan Plaza
CITY-ST-ZIP New York, NY 10005

☐ Change ☒ Addition

13. 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 or supplemental 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James J. Brinkerhoff

Date

Daytime Phone #

2/8/00 (212) 859-7185

CR2E034 (9/99)