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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 31 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

G10697 DOCUMENT #

officer or director of the corporation of the

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ICR, INC. Principal Place of Business Mailing Address 9549 LAVILL COURT 9549 LAVILL COURT 6220 S. ORANGE BL. TR., STE 142 6220 S. ORANGE BL. TR., STE 142 WINDERMER FL 34786 WINDERMERE FL 34786 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/12/1982 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2235434 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. Yes Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Castro, Lourdes 6220 S. ORANGE BL. TR. 82 STE 142 ORLANDO FL 32809 11. Pursuant to the pr erida Statutes, the above-named corporation submits this statement for the purpose of changing its registered hange was authorized by the corporation's board of directors. I hereby accept the appointment as registered Such change was authorized by the corporation's board of directors. I hereby accept the appointment Spection 507.0505, Florida Statutes. office or registe agent I an (NOTE Registered Agent signature required when reinstating) 12. RS AND DIE 13. TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE Addition REINA, ERASMO NAME 1.2 NAME 6220 S. ORANGE BLVD., TR., SUITE 142 STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 32009 CITY-ST-ZIP 1.4 CITY - ST - ZIP Change DELETE Addition TITLE 21 TITLE REINA, JOHN F NAME 2.2 NAME 4220 S. ORANGE BLVD., TR., SUITE 142 STREET ADDRESS 2.3 STREET ADDRESS **ORLANDO FL-32809** 2. 4 CITY - ST - ZIP CITY-ST-ZIP TD DELETE 3.1 TITLE Addition TITLE REINA, RICARDO NAME 3.2 NAME -8220 C. ORANGE BLVD., TR.; GUITE 142 -STREET ADDRESS 3.3 STREET ADDRESS ORLANDO FL 32809 CITY-ST-ZIP 3.4. CiTY-ST-ZIP DELETE Addition TITLE 4.1 TITLE **REINA, JUAN P** 4. 2 NAME NAME 8220 S. OPANGE BLVD., TR., SUITE 142. 4.3 STREET ADDRESS STREET ADDRESS OBLANDO FL-32809 -CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE REINA. LUIS E NAME 5.2 NAME 8220 S. ORANGE BLVD., TR., SUITE 142-STREET ADDRESS 5.3 STREET ADDRESS OPLANDO FL 32800-5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 6.1 TITLE NAME & 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY+ST-ZIP 6.4 CITY-ST-ZIP

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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 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 of the