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Feb 07 1997 8:00am
Secretary of State

**PROFIT
CORPORATION
ANNUAL REPORT
1997**



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

DOCUMENT # H17979 (6)

1. Corporation Name
INTERCONTINENTAL TEXTILES CORPORATION

Principal Place of Business

**774 S. MILITARY TRAIL
DEERFIELD FL 33442**

Mailing Address

**774 S. MILITARY TRAIL
DEERFIELD FL 33442-3025**



3. Date Incorporated or Qualified

08/23/1984

3a. Date of Last Report

01/26/1996

4. FEI Number

65-0018058

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

2. Principal Place of Business

21 3405 NW 9TH AVENUE

Suite, Apt. #, etc.

22 SUITE 1208

City & State

23 FORT LAUDERDALE, FL

Zip

24 33309

Country

2a. Mailing Address

26 3405 NW 9TH AVENUE

Suite, Apt. #, etc.

27 SUITE 1208

City & State

28 FORT LAUDERDALE, FL

Zip

29 33309

Country

9. Name and Address of Current Registered Agent

**KAPLAN, ERIC J.
110 BRICKELL AVE.
SEVENTH FLOOR
MIAMI FL 33131**

10. Name and Address of New Registered Agent

81 Name

ERIC J. KAPLAN

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

1100 BRICKELL AVENUE

83

SEVENTH FLOOR

84 City

MIAMI,

FL

85 Zip Code
33131

11. 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 true if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

**AS
NAME KAPLAN, ERIC J
STREET ADDRESS 1100 BRICKELL AVE. SEVENTH FLOOR
CITY-ST-ZIP MIAMI FL**

TITLE ☐ DELETE

**PST
NAME COVINGTON, DEANA L
STREET ADDRESS 774 S. MILITARY TRAIL
CITY-ST-ZIP DEERFIELD BEACH FL**

TITLE ☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

**PRESIDENT
DEANA L. COVINGTON
3405 NW 9TH AVENUE, SUITE 1208
FORT LAUDERDALE, FLORIDA 33309**

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 changed, or on an attachment with an address.

SIGNATURE:

Deana L. Covington
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/1/97

CR2E034 (9/96)