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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J84422

(1)

FILED Mar 13 1998 8:00am Secretary of State

ICBM WORLDWIDE MARKETING ASSOCIATES, INC. Principal Place of Business Mailing Address PO BOX 80-209 PO BOX 60-209 **AVENTURA FL 33280 AVENTURA FL 33280** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/27/1987 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0015144 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 28 8. This corporation owes or has paid the current feet intangible Personal Property Tax due June 30. Country 25 29 Personal Property Tax due June 30. 24 30 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name SCREMIN, ANTHONY J. 37 NE 26TH STREET Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33137** 83 84 City Zip Code Pursuant to the provisions of Sections 607.05.02 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and trie if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Channe Addition TITLE 11 TITLE JONES, DONNA 1.2 NAME NAME 20191 E COUNTRY CLUB DR. STREET ADORESS 1.3 STREET ADDRESS NORTH MIAMI BCH. FL CITY-ST-ZIP 1.4 City-St-ZIP DELETE Change __ Addition TITLE 21 TITLE JONES, RICHARD A. NAME 22 NAME 20191 E COUNTRY CLUB DR. STREET ADORESS 2.3 STREET ADDRESS AVENTURA FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELE1E 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-\$1-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 61 TITLE Change Addition 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

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 cyclic 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 or far attrictment with an address.

SIGNATURE:

DOWNA JONES

3/2/98