2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

Jan 31, 2005 08:00 AM Secretary of State DOCUMENT # J91935 INTERNATIONAL COMMERCIAL SUPPLY, INC. Principal Place of Business Mailing Address 2016 E SAXON STREET 2016 E SAXON STREET TAMPA, FL 33605 US TAMPA, FL 33605 CR2E034 (10/03) 01242005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2892839 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MEKDECI, PATRICK DO NOT WRITE 2016 E SAXON STREET TAMPA, FL 33605 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. ent and title if applicable Registered Agent signature required when reinstating) **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 HOROAG2061:15 10. OFFICERS AND DIRECTORS 01/31/05-80071-024 150.00 TITLE MEKDECI, PATRICK FRANCI NAME 2016 E SAXON STREET STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33605 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. 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 10 or Block 11 if changed, or on an attachment with an

SIGNATURE:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

FILED