

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Axtham  
Secretary of State

1995

5-23-95 B. 6879-OF CORPORATIONS

APPROVED  
FILED

MAY 23 11:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **J94246** (2)

1. Corporation Name:  
**INTERNATIONAL COMMUNICATIONS, INC.**

Principal Place of Business:

Mailing Address:

% BRUCE A. MITCHELL, ESQ.  
1825 SOUTH RIVERVIEW DR  
MELBOURNE FL 32901

% BRUCE A. MITCHELL, ESQ.  
1825 SOUTH RIVERVIEW DR  
MELBOURNE FL 32901

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business:		2a. Mailing Address:		3. Date Incorporated or Qualified:	3a. Date of Last Report:
21		26		09/28/1987	03/15/1994
22 State Apt # etc:		27 State Apt # etc:		4. FBI Number:	Applied For:
22		27		59-2857551	Not Applicable
23 City & State:		28 City & State:		5. Certificate of Status Desired:	\$8.75 Additional Fee Required
23		28		<input type="checkbox"/>	
24		25		6. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/> \$5.00 May Be Added to Fees	
29		30		6. This corporation has liability for international tax under Florida Statutes: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
MITCHELL, BRUCE A. 1825 S RIVERVIEW DRIVE MELBOURNE FL 32901				B1 Name:			
				B2 Street Address (P.O. Box Number is Not Acceptable):			
				B3:			
				B4 City:			
				FL B5 Zip Code:			

11. Pursuant to the provisions of Sections 607.01(6), 607.01(7), and 607.15(1)(B), 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 language of Sections 607.01(6), Florida Statutes.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
OFFICER	S	OFFICER	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ARVIDSON, SUSAN	OFFICER	
STREET ADDRESS	2939 ATLANTIC ST.	OFFICER ADDRESS	
CITY	MELBOURNE BEACH FL	CITY	
OFFICER	P	OFFICER	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAMB, LUKE	OFFICER	
STREET ADDRESS	2939 ATLANTIC ST.	OFFICER ADDRESS	
CITY	MELBOURNE BCH. FL	CITY	
OFFICER		OFFICER	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		OFFICER	
STREET ADDRESS		OFFICER ADDRESS	
CITY		CITY	
OFFICER		OFFICER	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		OFFICER	
STREET ADDRESS		OFFICER ADDRESS	
CITY		CITY	
OFFICER		OFFICER	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		OFFICER	
STREET ADDRESS		OFFICER ADDRESS	
CITY		CITY	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and claims no liability for the information stated in Sections 139.07(2)(b), Florida Statutes. I further certify that the information is correct and true, 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 its successor or together responsible to revise this report as required by Chapter 607, Florida Statutes, and that my name appears in the Section 607 of the Florida Statutes and that my name has not changed or been altered without my address.

SIGNATURE: *Susan Arvidson*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
SUSAN ARVIDSON

5/19/95  
SECRETARY

407 951 2184

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CORPORATION  
STATE OF FLORIDA

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MAY 22 1995 15

DOCUMENT # **J94441**

(9)

STATE  
TALLAHASSEE, FLORIDA

KEENE SYSTEMS, INC.

1801 SHREVEPORT TRAIL  
PLANO TX 75023  
US

2000 N CENTRAL EXPWY #115  
PLANO TX 75074  
US

21 **501 2ND AVE**  
22 **SUITE A-4**  
23 **DALLAS, TX**  
24 **75226** 25 **USA**  
26 **501 2ND AVE**  
27 **SUITE A-4**  
28 **DALLAS, TX**  
29 **75226** 30 **USA**

3 **09/24/1987** 3a **04/18/1994**  
4 **65-0006033**  
5 **\$8.75 Additional Fee Required**  
6 **\$5.00 May Be Added to Fees**  
7 **Not Applicable**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KEENE, JEAN**  
**1660 COUNTRY LANE**  
**TITUSVILLE FL 32780**

81 **KEENE, JEAN**  
82 **1660 COUNTRY LN.**  
83  
84 **TITUSVILLE FL 32780**

11. I, the undersigned, being a resident qualified to be a domestic corporation officer or director, and being the holder of the majority of the total amount of stock of the corporation, do hereby certify that the foregoing is a true and correct statement of the names and addresses of the persons authorized to be registered agents of the corporation in the State of Florida, and that the same persons are qualified to be registered agents of the corporation in the State of Florida.

12. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS AND TO REGISTERED AGENTS

12. NAME: **PST KEENE, LANCE L. 177 COTTONWOOD PLANO TX D**  
12. NAME: **KEENE, LANCE L. 177 COTTONWOOD PLANO TX**

13. ADDITIONAL CHANGES TO OFFICERS AND TO REGISTERED AGENTS  
13. NAME: **PST KEENE, LANCE L. 501 2ND AVE SUITE A-4 DALLAS, TX 75226**  
13. NAME: **KEENE, LANCE L. 501 2ND AVE SUITE A-4 DALLAS, TX 75226**

14. I, the undersigned, certify that the information supplied on this report is true and correct, and that the corporation is in compliance with the provisions of the Florida Statutes, Chapter 607, and that the corporation is authorized to do business in the State of Florida. I further certify that the corporation has the same officers and directors as those named in this report, and that the names of the persons named in this report are the names of the persons who are authorized to be registered agents of the corporation in the State of Florida.

SIGNATURE:

5/18/95 214-826-3551