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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(7)

## **FILED** May 15 1998 8:00am Secretary of State



DOCUMENT I. Corporation Namo	#	K53530

I.C.G. HOLDINGS INCORPORATED

Principal Place	o of Busines	Mailing Address				
Principal Place of Business  W PETER S. CAHALL 300 INTERNATIONAL PKWY SUITE 270 HEATHROW FL 32746  Mailing Address  W PETER S. CAHALL 300 INTERNATIONAL PKWY HEATHROW FL 32746		Kwy Suit	E 270	DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  12/22/1988		
2. Principal Planting 1 Suite, Apt. 6	ace of Business	2a. Mailing Address 26 Suite, Apt. #, etc.			4. FEI Number  59-2935552  5. Certificate of Status Desired □	Applied For Not Applicable \$8.75 Additional
City & State		27 City & State 28	Cou	ntny	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 4	Country 25  9. Name and Address of Curi	Z(p 29 cent Registered Agent	30	,	8. This corporation owes or has paid the cu     Personal Property Tax due June 30.      10. Name and Address of New Registered	Yes No
CAHALL, PETER S. 300 INTERNATIONAL PKWY., SUITE 270 HEATHROW FL 32748		-	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City			
office or re agent. I ar SIGNATURE	o the provisions of Sections 607.0 ogistered agent, or both, in the Sta in familiar with, and accept the ob-	ate of Horida. Such change was ligations of, Section 607.0505, F	authorize Iorida Stat	d by the corpo utes.	orporation submits this statement for the purpose oration's board of directors. I hereby accept the appropriet when relinstating)  DATE	of changing its registered pointment as registered
12.		ND DIRECTORS	13.	. Agi ni signarore n	ADDITIONS/CHANGES TO OFFICERS ANI	D DIRECTORS IN 12
TITLE	D	DELETE	1.1 1)			☐ Change ☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP	CAHALL, PETER S. 300 INT'L PKWY., STE. 27 HEATHROW FL	0		AME REET ADDRESS TY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TI			Change Addition

**CAMPISI, JAMES** 2.2 NAME 200 INT'L PKWY, STE 270 2.3 STREET ADDRESS STREET ADDRESS HEATHROW FL CITY-ST-ZIP 2. 4 CtTY - ST - ZIP Change DELETE Addition | TITLE 3.1 TITLE GREENE, LOWELL H. 3.2 NAME NAME 300 INT'L PKWY., STE. 270 STREET ADDRESS 3.3 STREET ADDRESS HEATHROW FL CITY-ST-ZIP 3.4. CITY - ST - ZIP DELFTE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - 7IP DELETE Change Addition 5.1 THILE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 City - St - ZiP CITY-ST-ZIP DELETE Change Addition 6.1 THLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

14. 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 receivor or trustudent 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 attraching them.