

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

• PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # K72576

(7)

1. Corporation Name

ICN, CORP.



Principal Place of Business

1801 S. FEDERAL HWY
SUITE 300
DELRAY BEACH FL 33483
US

Mailing Address

1801 S. FEDERAL HWY
SUITE 300
DELRAY BEACH FL 33483
US

3. Date Incorporated or Qualified
03/13/1989

3a. Date of Last Report
06/20/1995

4. FEI Number

65-0119405

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 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

CHERRY, MARTIN
13635 STAMFORD DR
WELLINGTON FL 33414

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL 85 Zip Code

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 title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DPC
NAME CHERRY, ERIC
STREET ADDRESS 3200 JASMINE DR
CITY-ST-ZIP DELRAY BEACH FL ☐ DELETE

TITLE DVS
NAME CHERRY, MARTIN
STREET ADDRESS 13635 STAMFORD DR
CITY-ST-ZIP WELLINGTON FL ☐ DELETE

TITLE D
NAME ANGEL, ALBERT
STREET ADDRESS 3900 MAGELLAN CIRC #717
CITY-ST-ZIP AVENTURA FL ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 2525 S. OCEAN BLVD.
1.4 CITY-ST-ZIP HIGHLAND BEACH, FL 33487

2.1 TITLE D ☐ Change ☒ Addition

2.2 NAME COSTICH, KEN
2.3 STREET ADDRESS 4500 N. QUARTZ HILL DR.
2.4 CITY-ST-ZIP TUCSON, AZ 85715

3.1 TITLE D ☐ Change ☒ Addition

3.2 NAME POTENZA, JACK
3.3 STREET ADDRESS 1801 S. FEDERAL HWY., SUITE300
3.4 CITY-ST-ZIP DELRAY BEACH, FL 33483 ☐ Change ☒ Addition

4.1 TITLE D ☐ Change ☒ Addition

4.2 NAME RANDAZZA, JOE
4.3 STREET ADDRESS 1801 S. FEDERAL HWY., SUITE300
4.4 CITY-ST-ZIP DELRAY BEACH, FL 33483 ☐ Change ☒ Addition

5.1 TITLE D ☐ Change ☒ Addition

5.2 NAME SLADE, JARVIS
5.3 STREET ADDRESS 666 3RD AVENUE
5.4 CITY-ST-ZIP NEW YORK, NY 10017

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME 500001838173
6.3 STREET ADDRESS -05/24/96--01028--028
6.4 CITY-ST-ZIP ***200.00

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP2E034 (12/95)