FILED
Jan 26, 2005
Secretary o

05 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

DOCUMENT # L00000006323

Name
IMPORT COMMERCIAL INTERCHANGE, L.L.C.

Principal Place of Business
E JACKSON ST
TE 200
MPA FL 33602

Mailing Address
609 E JACKSON ST
SUITE 200
TAMPA FL 33602

Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip
Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip
Country

1st MOORE CR2E083 (10/04)

4. FEI Number 59-3655663 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ROBBINS, R. JAMES JR
101 E KENNEDY BLVD
SUITE 3700
TAMPA FL 33602

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2005

MANAGING MEMBERS / MANAGERS

9.
TITLE MGRM
NAME PALLARDY III, LEE F
STREET ADDRESS 609 E. JACKSON ST., #200
CITY-ST-ZIP TAMPA FL
☐ Delete

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ADDITIONS/CHANGES ☐ Change ☐ Add

10.
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11. 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 fur indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Lee F. Pallardy, III Managing Partner 01/21/2
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date