

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000108100

**FILED**  
**Jan 10, 2012**  
**Secretary of State**

**Entity Name:** INTERNATIONAL COMMERCE PARTNERS, LLC

**Current Principal Place of Business:**

3120 WINKLER AVE EXT #30  
FT. MYERS, FL 33916

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 6986  
FORT MYERS, FL 33911

**New Mailing Address:**

**FEI Number:** 20-3896965

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MAUTE, WILLIAM R III  
3120 WINKLER AVE EXT #30  
FT MYERS, FL 33916 US

**Name and Address of New Registered Agent:**

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.

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

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** 4M MANAGEMENT, LLC  
**Address:** 3120 WINKLER AVE EXT #30  
**City-St-Zip:** FT MYERS, FL 33916

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

SIGNATURE: WILLIAM R MAUTE III

MGR

01/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date