## 2001 UNIFORM BUSINESS REPORT (UBR)

## Mar 26, 2001 8:00 am **DOCUMENT # M18314 Secretary of State** 1. Entity Name INTERNATIONAL COMMERCE GROUP, INC. 03-26-2001 90013 017 \*\*\*150.00 Principal Place of Business Mailing Address 3521 S.W. 88TH COURT P O BOX 558125 MIAMI FL 33165-4323 MIAMI FL 33255-8125 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2561932 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent-7: Name and Address of New Registered Agent MARTORY, JOSEPH J. Street Address (P.O. Box Number is Not Acceptable) 3521 S.W. 88TH COURT S-1411 **MIAMI FL 33165** City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CR2E034 (10/00) **PSD** ☐ Addition TITLE ☐ Delete TITLE Change NAME MARTORY, IRIS NAME STREET ADDRESS STREET ADDRESS 3521 S. W. 88TH CT. CITY-ST-7IP CITY-ST-7IP MIAMI FL 33165 TITLE MDVT Delete TITLE ☐ Change ☐ Addition NAME MARTORY, JOSEPH J NAME STREET ADDRESS STREET ADDRESS 3521 S. W. 88TH CT. CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33165 TITLE TITLE ☐ Change ☐ Addition ☐ Delete NAME RODRIGUEZ, GUILLERMO NAME STREET ADDRESS STREET ADDRESS 3521 S.W. 88TH CT. CITY-ST-ZIP CITY-ST-ZIP <u>MIAMI FL 33165</u> TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition Delete NAME

13. 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 further certify that the information indicated on this report or supplemental 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 receiver or trustee empowered to execute his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like amountered.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jate Day

Phone # 74F