

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

1. Corporation Name
INTERCONTINENTAL HOLDING GROUPE, INC.

Mailing Address

3405 NW 8TH AVE
SUITE 1208
FT LAUDERDALE FL 33309
US

3405 NW 9TH AVE
SUITE 1208
FT LAUDERDALE FL 33309
US

DO NOT WRITE IN THIS SPACE

10/30/1987

Applied For	
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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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ERIC J. KAPLAN
1100 BRICKELL AVE
SEVENTH FLOOR
MIAMI FL 33131

B1	Name
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82	Street Address (P.O. Box Number is Not Acceptable)
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83

84	City
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FL

Zip Code	
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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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PSY	<input type="checkbox"/> DELETE
NAME	COVINGTON, DEANA	
STREET ADDRESS	3405 NW 9TH AVE, SUITE 1208	
CITY - ST - ZIP	FT LAUDERDALE FL	

TITLE	AS	<input type="checkbox"/> DELETE
NAME	KAPLAN, ERIC	
STREET ADDRESS	1110 BRICKELL AVENUE, 7TH FLOOR	
CITY - ST - ZIP	MIAMI FL	

CITY OF DENVER	<input type="checkbox"/> DELETE
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP

CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP

☐ DELETE

CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	

2.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		

3.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		

		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
4.1 TITLE			
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY - ST - ZIP			

		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
5.1 TITLE			
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY - ST - ZIP			

6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. 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 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 receiver or trustee 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 attachment with an address.

SIGNATURE:

1-6-98 914-565 1933

CR2E034 (10/97)