## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

	AL REPORT Secretary of St. DIVISION OF CORPO				Secretar	Secretary of State		
DOCUN 1. Corporation	MENT # M7270	1 (9)		·, ·····				
	IC SALES CORP.							
Principal Place of Business  8853 SW 18TH ST., SUITE M-110 BOCA RATON FL 33433			200 E. LAS OLAS BLVD SUITE 100 FT. LAUDERDALE FL 33301-2248					
		US			3. Date incorporated or Qualified 03/21/1988	3a. Date of Last Re 04/23/1996	eport	
· · · · ·	ace of Business	2a. Mailing Address			4. FEI Number	Ap	plied For	
Suite, Apt. (	#, elc.	Suite, Apt. #, etc.			65-0097357	- \$8.75 A	t Applicable	
22		27	<del> </del>		5. Certificate of Status Desired	Fee Re	quired	
City & State		City & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 Added t		
Ζφ <b>24</b>	Country         Zip         Country           25         29         30							
9. Name and Address of Current Registered Agent FRANKEL, FRED 81				81 Name	IV. Halle dilo Accides of Iron No.	Jistored Agent		
200 E. LAS OLAS BLVD. SUITE 100				82 Street A	Address (P.O. Box Number is Not Acceptab	vie)		
FT. LAUDERDALE FL 33301				83				
			L					
				84 City		FL 85 Zip (	.xode	
11. Pursuant to	to the provisions of Sections 607.050 egistered agent, or both, in the State	)2 and 607 1508, Florida Statutes of Florida. Such change was au	, the ab	ove-named by the corp	corporation submits this statement for the p poration's board of directors. I hereby accep	urpose of changing its of the appointment as	s registered registered	
	m familiar with, and accept the oblig	ations of, Section 607.0505, Florid	da Stati	ites.				
SIGNATURE	Signature, typical or pointed name of registered age			Agent signature	required when reinstating)	DATE		
12.		ID DIRECTORS  DELETE	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTOR	S IN 12	
TITLE NAME	PD FRED FRANKEL	TT DECEIE	1.1 TiT 1.2 NA			L., Crange	Manager	
STREET ADDRESS	ARTA ON ANTIO TAMAS			REET ADDRESS				
CITY-ST-7IP	BOCA RATON FL			Y-ST-ZIP				
101.8	STD	DELETE	2.1 TIT	LE		Change	Addition	
NAME			2.2 NA	ME				
STREET ADDRESS	6853 SW 18TH ST, M-110			reet address	ж.			
CHTY - S1 - 7IP	BOCA RATON FL	DELETE	•	TY-ST-ZIP	<u> </u>	Change	☐ Addition	
NAME		□ octrit	3.1 TIT 3.2 NA			Unange	L. Padillon	
STREET ADDRESS				REET ADDRESS				
COTY - ST - ZIF				TY-ST-ZIP			····	
TITLE	1/10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	☐ DELETE	4.1 TiT	LE		Change	Addition	
NAME			4.2 N	ME				
STREET ADDRESS				REET ADORESS				
CITY-S1-ZIF		DELETE	4.4 CIT	Y-ST-ZIP		Change	Addition	
TOLE NAME		C) OLLLIE	5.1 till 5.2 NA			L. Criange	riugitti) (	
STREET ADDRESS				REET ADDRESS			1	
City-St-ZiP			1	Y-S1-ZIP				
TITLE	The state of the s	DELETE	6.1 T()			☐ Change	Addition	
NAME			6.2 NA	ME				
STREET ADDRESS			6.3 ST	reet address				
CHY-ST-ZIP			6.4 CF	Y-ST-ZIP				

14. I do 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:

**FILED** 

Apr 15 1997 8:00am