## 2000 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # M74392** 1. Entity Name INTERCAPITAL RESOURCES, INC.

## **FILED** May 04, 2000 8:00 am Secretary of State 05-04-2000 90087 008 \*\*\*158.75

Principal Place of Business Mailing Address  1701 NORTHEAST 115TH STREET. #7A 1701 NORTHEAST 115TH S NORTH MIAMI FL 33181 NORTH MIAMI FL 33181-31										
				Γ. #7A						
2. Principal P	Place of Business	3. Mailing Addre	ess							
	4 -1-	Code And Mar			'		DO NOT W			(81) 81911 1881
Suite, Apt. #, etc.		Suite, Apt. #, 6	Suite, Apt. #, etc.				DO NOT W	HITE IN THIS	SPACE	
City & State		City & State	City & State		4. FEI	FEI Number <b>65-0324817</b>		317		opplied For Not Applicable
Zip	Country	Zip	Co	untry	<b>5.</b> Ceri	tificate of S	Status Desired		\$8.75 A	
<del></del>	6. Name and Address	of Current Registered Agent			7. Nan	ne and Ade	dress of New	Registered		
				Name						_
941	RPORATE CREATIONS FOURTH STREET #200			Street Ad	dress (P.O. Box	Number is	Not Acceptal	ble)		
MIA	MI BEACH FL 33139			City				F	Zip Co	de
		statement for the purpose of cha					the Ctate of	Florida		
	Signature, typed or printed name of re				e required when reinsta	<del></del>		DATE		
9. This corpo	Signature, typed or printed name of re- pration is eligible to satisfy it requirement and elects to do ria on back)	s Intangible FIL After M	(NOTE: Registrees).E NOW!!! FE IAY 1, 2000 Fe ck Payable to	E IS \$150.0 ee will be \$55	0 60.00 of State	10. Electio Trust F	n Campaign und Contribu	Financing tion.	\$5.	00 May Be ed to Fees
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of the corporation or the receiver or trustee empowered to execute this report as received 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 empowered.

SIGNATURE:

G OFFICER OR NIRECTOR SIGNATURE AND TYPED OR PRINTED NAME OF