

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # M78237 (8)

1. Corporation Name

INTERNATIONAL COTTON GROUP, INC.



Principal Place of Business

Mailing Address

5575 N.W. 74TH AVE. 8356 N.W. 74 AVE. 5575 N.W. 74TH AVE. 8356 N.W. 74 AVE.
MIAMI FL 33166 Medley, FL 33166 MIAMI FL 33166 Medley, FL 33166
US

2. Principal Place of Business

2a. Mailing Address

21 8356 NW 74 AVE 26 8356 NW 74 AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 MEDLEY MEDLEY, FL.

24 FL 33166 USA 29 33166 30 USA

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

04/26/1988

3a. Date of Last Report

08/16/1995

4. FEI Number

65-0046152

Applied For

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

ALHAMBRA REGISTERED AGENTS
2 ALAMBRA PLAZA
SUITE 1202
CORAL GABLES FL 33134

81 Name

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

83

84 City

FL

85 Zip Code

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 of Registered Agent or Registered Agent in Charge

Signature of Registered Agent or Registered Agent in Charge

DATE

12. OFFICERS AND DIRECTORS

TITLE P PESCECCHIO ALBERTO ☐ DELETE
NAME PRESCETTO, ALBERTO
STREET ADDRESS 5575 NORTHWEST 74 AVENUE
CITY- ST- ZIP MIAMI FL

TITLE D ☐ DELETE
NAME RAFFO, JUAN MIGUEL
STREET ADDRESS 5575 NORTHWEST 74 AVENUE
CITY- ST- ZIP MIAMI FL

TITLE D ☐ DELETE
NAME TENCIELA, LUIS
STREET ADDRESS 5575 NORTHWEST 74 AVENUE
CITY- ST- ZIP MIAMI FL

TITLE D ☐ DELETE
NAME TENICELA, LUIS
STREET ADDRESS 5575 NORTHWEST 74 AVENUE
CITY- ST- ZIP MIAMI FL

TITLE D ☐ DELETE
NAME BADIOLA, FERNANDO
STREET ADDRESS 5575 NORTHWEST 74 AVENUE
CITY- ST- ZIP MIAMI FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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, or as an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Alberto Prescetto

February 19th 1996

CR2E034 (12/95)