

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 12, 2002 8:00 am**  
**Secretary of State**

09-12-2002 90063 046 \*\*\*150.00

**DOCUMENT # P00000036417**

1. Entity Name  
**I C BLEU, INC.**

Principal Place of Business

**1757 LONGVIEW LANE  
TARPON SPRINGS FL 34689**

Mailing Address

**1757 LONGVIEW LANE  
TARPON SPRINGS FL 34689**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

**3060 AIT 19**

Suite, Apt. #, etc.

**3060 AIT 19**

City & State

**Palm Harbor FL**

City & State

**Palm Harbor FL**

Zip

**34683**

Country

**USA**

Zip

**34683**

Country

**USA**

4. FEI Number **59-3640619**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**CAYWOOD, COOPER**

**1757 LONGVIEW LANE**

**TARPON SPRINGS FL 34689**

7. Name and Address of New Registered Agent

Name

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

City

**FL**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  
(See criteria on back)

**FILE NOW!!! FEE IS \$550.00  
After September 13, 2002 Fee will be \$750.00  
Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **DP** ☐ Delete  
NAME **CAYWOOD, COOPER**  
STREET ADDRESS **1757 LONGVIEW LANE**  
CITY-ST-ZIP **TARPON SPRINGS FL 34689**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

CR2E034 (4/02)

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 this 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 empowered.

SIGNATURE:

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Aug 9 2002 727 460 8168**  
Date Daytime Phone #



September 9, 2002

To: Division of Corporations, Uniform Business Report Fillings

Attached is the 2002 UBR. We are submitted a check for \$150.00 due to the fact that we are unable to locate the first 2002 UBR request.

Sincerely,

A handwritten signature in black ink, appearing to read 'Cooper Caywood', is written over a horizontal line.

Cooper Caywood  
President

***i.c.bleu, inc.***

1757 Longview Lane, Tarpon Springs, Florida 34689 Phone: 727.939.1560  
eFax: 520.962.2537 Web: [www.icbleu.com](http://www.icbleu.com)