**FILED** 

## **2001 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE:

## Jul 26, 2001 8:00 am **DOCUMENT #** P00000056385 **Secretary of State** 1. Entity Name ICS MANAGEMENT SERVICES, INC. 07-26-2001 90007 032 \*\*\*150.00 Principal Place of Business Mailing Address GA d 12209 S.W. 14TH LANE # / 3 12209 S.W. 14TH LANE **MIAMI FL 33184** MIAMI FL 33184 add 2. Principal Place of Business 3. Mailing Address ane 12209-5W 2209-SW.14 Lane Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE ## | # 1311 Applied For City & State City & State 4. FEI Number LIAM MIAM Not Applicable Country \$8.75 Additional MIAMI- A. de Certificate of Status Desired MIBMINIAL Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GARCIA, ANGEL A Street Address (P.O. Box Number is Not Acceptable) 12209 S.W. 14TH LANE **MIAMI FL 33184** City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 12, 2001 Fee will be \$750.00 П Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE . PD ☐ Delete TITLE Addition CR2E034 (5/01 ☐ Change William Musteller NAME GARCIA, ANGEL A NAME 12209 S.W. 14TH LANE #1311 12209-SW. 14 Lane #1311 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33184** CITY-ST-ZIF MIAMI, FL. 33184 TITLE W ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE: ☐ Delete ☐ Change Addition NAMÉ NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-7IP 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

## ICS MANAGEMENT SERVICES, INC

July 21, 2001

Florida Department of State Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, Florida. 32302-1500

Dear Sir or Madam:

Enclosed, please find 2001 Uniform Business Report (UBR) document # P00000056385, and check #1068 in the amount of \$150.00. The reason why this report was not submitted in time was to the fact that we never received the first notice. As you can notice from copy attached f envelope in which it was mailed from your office, the Suite #1311 is missing, I was lucky this time and found this envelope in the floor of the lobby of our building. We will greatly appreciate if you can update your records to add the suite number #1311.

Sincerely,

Angel A. Garcia President

Enclosures