

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2002 8:00 am
Secretary of State
 05-03-2002 90015 030 ***150.00

0309872 AV

DOCUMENT # P00000079500

1. Entity Name

INTERNATIONAL CONSULTANTS & INVESTMENT GROUP LIMITED CORP.

Principal Place of Business

**676 WEST PROSPECT RD
 FORT LAUDERDALE FL 33309**

Mailing Address

**6278 N FEDERAL HWY
 FT LAUDERDALE FL 33308**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1029255

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ELIA, GEORGE
 676 WEST PROSPECT RD
 FORT LAUDERDALE FL 33309**

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.

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 \$150.00
 After May 1, 2002 Fee will be \$550.00
 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
<input type="checkbox"/> Delete	ELIA, GEORGE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	6278 N FEDERAL HWY	STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33308	CITY-ST-ZIP	
<input checked="" type="checkbox"/> Delete	PVSD ELIA, GEORGE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	President, Director
STREET ADDRESS	676 WEST PROSPECT RD	STREET ADDRESS	GEORGIS, Michael
CITY-ST-ZIP	FORT LAUDERDALE FL 33309	CITY-ST-ZIP	676 West Prospect RD
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	Fort Lauderdale FL 33309
STREET ADDRESS		STREET ADDRESS	Vice President
CITY-ST-ZIP		CITY-ST-ZIP	ELIA, George
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	676 West Prospect RD
STREET ADDRESS		STREET ADDRESS	Fort Lauderdale FL 33309
CITY-ST-ZIP		CITY-ST-ZIP	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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

George Elia, VP/D

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/02 954-566-6562

Date

Daytime Phone #

CR2E034 (9/01)