

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 14, 2002 8:00 am**  
**Secretary of State**

05-14-2002 90275 028 \*\*\*150.00

**DOCUMENT #** P01000053594  
1. Entity Name  
Integratedcircuit Design Services, Inc.

**DO NOT WRITE IN THIS SPACE**

|  |                |   |                |
|--|----------------|---|----------------|
| 2. Principal Place of Business<br>410 N. Wickham Road<br>Suite, Apt. #, etc.<br>Suite 201<br>City & State<br>Melbourne Florida |                | 3. Mailing Address<br>410 N. Wickham Road<br>Suite, Apt. #, etc.<br>Suite 201<br>City & State<br>Melbourne, Florida |                |
| Zip<br>32935   | Country<br>USA | Zip<br>32935  | Country<br>USA |

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4. FEI Number  Applied For  
Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name: Christopher J. Coleman, Esquire  
Street Address (P.O. Box Number is Not Acceptable): 1329 Bedford Dr., Ste 1  
City: Melbourne FL Zip: 32940

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 \_\_\_\_\_ (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)

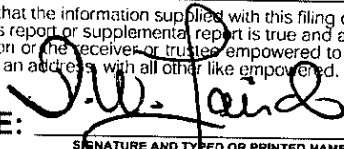
January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

| 11. OFFICERS AND DIRECTORS                     |  |  |  |
|--|--|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | President/Director<br>Steven Brantley<br>419 N. Wickham Rd. Ste.1<br>Melbourne, FL 32935           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | Secretary/Treasurer/Director<br>Donald Laird<br>410 N. Wickham Rd., Ste.201<br>Melbourne, FL 32935 | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |
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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 on an attachment with an address with all other like empowered.

SIGNATURE:  Donald Laird Date: 4/26/02 Daytime Phone #: 321-254-1173

CR2E034B (12/01)