## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000048644

FILED May 01, 2004 Secretary of State

| Entity Nam   | ie: THEICOR  | R GROUP CORP                   |   |  |  |
|--|--|--------------------------------|---|--|--|
| Current Principal Place of Business:   |  |                                | New Principal Place                         | of Business:                                 |  |
| 3680 NW 1<br>MIAMI, FL 3   |  |                                |   |  |  |
| Current Mailing Address:   |  |                                | New Mailing Addres                          | New Mailing Address:                         |  |
| 3680 NW 1<br>MIAMI, FL 3   |  |                                |   |  |  |
| FEI Number:  | 20-0469497   | FEI Number Applied For ( )     | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )            |  |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent:  |  |                                |   |  |  |
| SILVA, ARN<br>3680 NW 1<br>MIAMI, FL 3   | 1TH ST   |                                |   |  |  |
| 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. |  |                                |   |  |  |
| SIGNATUR   |  |                                |   |  |  |
|  |  | c Signature of Registered Ager | nt  | Date   |  |
| Election Cam   | paign Financing  | Trust Fund Contribution ( ).   |   |  |  |
| OFFICERS AND DIRECTORS:  |  |                                | ADDITIONS/CHANG                             | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | P ()<br>ARMANDO, SILV<br>3680 NW 11TH 3<br>MIAMI, FL 3312  | ST                             | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition                        |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | VP,T ()<br>JOSE, TORRES<br>8502 NW 198TH<br>MIAMI, FL 3301 | ITERR                          | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition                        |  |

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARMANDO SILVA Ρ 05/01/2004