

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000072902

FILED
Apr 24, 2008
Secretary of State

Entity Name: INTERNET CONCEPTS UNLIMITED INC.

Current Principal Place of Business:

713 CORRIGAN DR
SAINT AUGUSTINE, FL 32092

New Principal Place of Business:

1162 FROMAGE CIRCLE W.
JACKSONVILLE, FL 32225

Current Mailing Address:

713 CORRIGAN DR.
SAINT AUGUSTINE, FL 32092

New Mailing Address:

411 WALNUT ST
#4523
GREEN COVE SPRINGS, FL 32043

FEI Number: 20-1114977

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURNETT, STEVEN
713 CORRIGAN DR.
SAINT AUGUSTINE, FL 32092 US

Name and Address of New Registered Agent:

BURNETT, STEVEN
1162 FROMAGE CIRCLE W.
JACKSONVILLE, FL 32225 US

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: STEVEN BURNETT

04/24/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BURNETT, STEVEN PRES.
Address: 713 CORRIGAN DR.
City-St-Zip: SAINT AUGUSTINE, FL 32092 US

Title: T () Delete
Name: BURNETT, KATHRYN TREAS.
Address: 713 CORRIGAN DR.
City-St-Zip: SAINT AUGUSTINE, FL 32092 US

Title: VP () Delete
Name: BURNETT, NICOLE J VP
Address: 2178 - D BEES FERRY RD.
City-St-Zip: CHARLESTON, SC 29414 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BURNETT, STEVEN PRES.
Address: 1162 FROMAGE CIRCLE W.
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: T (X) Change () Addition
Name: BURNETT, KATHRYN TREAS.
Address: 1162 FROMAGE CIRCLE W.
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: VP (X) Change () Addition
Name: BURNETT, NICOLE J VP
Address: 1162 FROMAGE CIRCLE W.
City-St-Zip: JACKSONVILLE, FL 32225 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: STEVEN BURNETT

PRES

04/24/2008

Electronic Signature of Signing Officer or Director

Date