


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 03, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000091071 1. Entity Name INTERNATIONAL CONSTRUCTION & DEVELOPMENT ADVISORS, INC.	
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Principal Place of Business 12500 SW 76 STREET MIAMI, FL 33183 US	Mailing Address 12500 SW 76 STREET MIAMI, FL 33183 US
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DO NOT WRITE IN THIS SPACE



03272006 No Chg-P CR2E034 (11/05)

4. FEI Number
90-0195471

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**COBA, RICHARD
12500 SW 76 STREET
MIAMI, FL 33183**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COBA, RICHARD 12500 SW 76 STREET MIAMI, FL 33183
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/S LOURDES, COBA M 12500 SW 76 STREET MIAMI, FL 33183
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**DO NOT WRITE
IN THIS SPACE**

000000488353
04/17/06-80003-015 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-31-06 **305-380-4079**
Date Daytime Phone #