


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 05, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # P06537		
1. Entity Name INTERNATIONAL COMPONENTS CORPORATION		
Principal Place of Business 4 WESTBROOK CORP. CENTER, STE 900 WESTCHESTER, IL 60154	Mailing Address 4 WESTBROOK CORP. CENTER, STE 900 WESTCHESTER, IL 60154	




04252008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 36-2642978	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  LEXISNEXIS DOCUMENT SOLUTIONS INC 1201 HAYS STREET TALLAHASSEE, FL 32301	<b>DO NOT WRITE IN THIS SPACE</b>
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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   
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/25/08

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

1000000948284  
06/02/08-80049-003 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP *	D GAZA, JAMES CEO 4 WESTBROOK CORP CENTER, STE 900 WESTCHESTER, IL 60154
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP MCCLURE, STEPHEN M 4 WESTBROOK CORP CENTER STE 900 WESTCHESTER, IL 60154
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST ITALIANO, JOSEPH H 4 WESTBROOK CORP CENTER, STE 900 WESTCHESTER, IL 60154
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V OAKES, STUART B 4 WESTBROOK CORP CENTER, STE 900 WESTCHESTER, IL 60154
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WENTINK, ROBERT 4 WESTBROOK CORP CENTER, STE 900 WESTCHESTER, IL 60154
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOGAN, ROBERT 4 WESTBROOK CORP CENTER, STE 900 WESTCHESTER, IL 60154

**DO NOT WRITE IN THIS SPACE**

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

Date

Daytime Phone #

4/25/08

708-316-4407