## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name P07875

(8)

ICCA INVESTMENTS, INC.

**FILED** May 01 1996 8:00 am Secretary of State

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ALIANTA CA 30328  ALIANTA CA 30328  2. Principal Picce of Business 2. A Marking Address .  2. Marking Address .  2. Substances of Business 3. Date incorporated or Qualified 10/25/1995  3. Date incorporated or Qualified 10/25/1995  4. FET Number .  5. Substances .  5. Certificate of Status Desired .  5. Certificate .  5. Certificate of Status Desired .  5. Certificate of Status Desired .  5. Certificate .	Principal Place of Business Mailing Address							
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Site, Aut #, etc.  2	2. Principal Pla	ice of Business	2a. Mailing Address				<u> </u>	
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Zep			<b></b>					
Section   Sect	23 Zio	Country	· +	Countr				
9, Name and Address of Current Registered Agent  10, Name and Address of New Registered Agent  11, Pursuant to the provisions of Sections 607.0502 and 607.1508. Florids Statutes, the above named corporation submits this statement for the purpose of changing its registered agent. or both, in the State of Endos Social during was authorized by the comporation's board of directors. Thereby an equit the appointment are registered egent. I am the State of Endos Social during was authorized by the comporation's board of directors. Thereby an equit the appointment are registered egent. I am tension to the composition's board of directors. Thereby an equit the appointment are registered egent. I am tension to the composition's board of directors. Thereby an equit the appointment are registered egent. I am tension to the composition's board of directors. Thereby are equit the appointment are registered egent. I am tension to the composition's board of directors. Thereby are equit the appointment are registered egent. I am tension to the composition's board of directors. Thereby are equit the appointment are registered egent. I am tension to the composition's board of directors. Thereby are equit the appointment are registered egent. I am tension to the composition's board of directors. Thereby are equit the appointment are registered egent. I am tension to the composition's board of directors. Thereby are equit the appointment are registered egent. I am tension to the composition of the composition	24	<u>├</u>	F	<del>}_</del> _	,			
### Addition  ###################################		1 . 1		100		10. Name and Address of New R	egistered Agent	
PLANTATION FL 33324				8	Name			
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PLANTATION FL 33324	1200 6	DINE ISLAND DOAD	J, D.	84	Street Address (P.O. Box Number is Not Acceptable)			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida S. Schicharge was arrhorized by the corporation's board of directors. Thereby accept the approximent as registered agent, if an internal with a registered agent, if	PI ANTA	TION FL 33324		8	3			
T.   Fursiant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agont, or both, in the State of Florids. Such claring was authorized by the corporation's board of directors. I hereby accept the appointment as registered depent. I am framillar with, and accept the obligations of Section 607,0505, brinds Stateties.    SIGNATURE	I Dalin	11014 1 E 33324		_			las I Zo Codo	
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14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes: I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR