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 # PO8444 (2) I.C.I. PROPERTIES OF DELAWARE, INC. Principal Place of Business Mailing Address 1200 SHEPPARD AVE E SUITE 108 WILLOWDALE .ONTARIO. CANADA M2K -255 WILLOWDALE .ONTARIO. CANADA M2K -255				3. Date Incorporated or Qualified 38. Date of Last Report	
				12/17/1985	3a. Date of Last Report 04/10/1995
2. Principal Pla	ice of Business	2a. Mailing Address 26		4. FEI Number	Applied For
Suite, Apt. #	, etc.	Suite, Apt #, etc.		76-0009603	Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zip	Country	8. This corporation has liability fo	Added to Fees r intangible tax under s 199,032.
24	25	29	30	Florida Statutes	es 🗌 No
	9. Name and Address of Currer	nt Registered Agent	81 Name	10. Name and Address of New	Registered Agent
STEAR	IS, WEAVER, MILLER P.A.				
	ACKSON ST		82 Street Add	ress (P.O. Box Number is Not Accepta	ible)
SUITE 2			83		
TAMPA	FL 33601		84 City		FL 85 Zip Code
SIGNATURE	i, and accept the obligations of, sect	ion 607.0505, Florida Statute	95. After Populared Agent signature reques		DATE FICERS AND DIRECTORS IN 12
TITLE	PSD	DELETE	1 1 TITLE		☐ Change ☐ Addition
NAME	LEVY, CLIFF		1.2 NAME		
STREET ADDRESS CITY - ST-ZIP	1616 CULBREATH ISLES DI TAMPA FL	RIVE	1.3 STREET ADDRESS		
THILE	VDAS	☐ DELETE	2 1 T-TLF		Change Addition
NAME	LEVY, ARIC		2.2 NAME		
STREET ADDRESS	14 YORK RIDGE RD		2.3 STREET ADDRESS		
CITY - ST - ZIP	NORTH YORK, ONTARIO M: TDV	2P -1R7	2.4 CiTY - ST - ZIP 3.1 TITLE		
NAMÉ	SHEPHERD, JOY	[] D_1.c.11	3.2 NAME		Change Addition
STREET ADDRESS	32 APOLLO DR.		3.3 STREET ADDRESS		
CITY - ST - ZIP	DON MILLS, ONT. M3B -2G	9	3.4 CHV - S1 - ZIP		
IITLE UAME	VAS	☐ DELETE	4 117LF		Change Addition
NAME STREET ACORESS	LEVY, SIGMUND 217 BURBANK DR		4.2 NAME 4.3 STREET ADDRESS		
DITY-S1-ZIP	WILLOWDALE, ONT M2K -11	P5	4.3 STREET ADDRESS		
TITLE		☐ DELETE	5 1 Titu!		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STRSET ADDRESS		
CITY-ST-ZIP		[] DELETE	6 1 TITLE		Change Addition
NAME		F-1	6.2 NAME		□ cuange □ X041000
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-S1-ZIP	continue that the leaf November 1	TALL NO. 12 (1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	6 4 CITY - ST - ZIP		
oath; that I	me mormation indicated on this arms am an officer or director of the corpt Block 13 illohanged, or d	ia report or supplemental and ration or the receiver or trust- y an attachment with an add	nua: report is true and accura se empowered to execute this fress	or the exemption stated in Section 119 to and that my signature shall have the size report as required by Chapter 607, F	e same legal effect as if made under lorida Statutes; and that my name
	SIGNATURE AND TYPED OR	PRINTED NAME OF SIGNING OFFICE	CER OR DIRECTOR	(Jate	Oxytime Phone it