

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

May 08 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P92000013339 (6)

1. Corporation Name
INTERIOR COMPONENT SYSTEMS, INC.

Principal Place of Business
13257 60TH STREET NORTH
CLEARWATER FL 34620

Mailing Address
13257 60TH STREET NORTH
CLEARWATER FL 34620



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3320 Scherer Dr. Suite, Apt. #, etc.		2a. Mailing Address 26 3320 Scherer Dr. Suite, Apt. #, etc.		3. Date Incorporated or Qualified 12/18/1992	
22 City & State 23 St Petersburg FL		27 City & State 28 St. Petersburg FL		4. FEI Number 59-3155632	
24 33716		25 Pinellas		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
26 33716		27 Pinellas		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
28 33716		29 Pinellas		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent TERRY, ALAN D 13257 60TH STREET NORTH CLEARWATER FL 34620		10. Name and Address of New Registered Agent 81 Name TERRY, ALAN D 82 Street Address (P.O. Box Number is Not Acceptable) 3320 Scherer Dr. 83 84 City St Petersburg FL 85 Zip Code 33716	
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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. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Alan D. Terry ALAN D TERRY Pres of I.C.S. Inc 4-27-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TERRY, ALAN D 13257 60TH STREET NORTH CLEARWATER FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	D TERRY, ALAN D 3320 Scherer Dr St Petersburg, FL 33716
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Alan D. Terry ALAN D TERRY Pres of I.C.S. Inc 4-27-98 (813) 546-9828

CR2E034 (10/97)