

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000062895

FILED
Jul 02, 2004
Secretary of State

Entity Name: INTERNATIONAL CHEMICAL SOUTH, INC.

Current Principal Place of Business:

101 SE 7TH ST., UNIT 4
DEERFIELD BEACH, FL 33441 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4667
DEERFIELD BEACH, FL 33442

New Mailing Address:

FEI Number: 65-0447444 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DALE, DONALD
4600 S. OCEAN BLVD., APT. 601
HIGHLAND BEACH, FL 33487

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DALE, DONALD
Address: 4600 S. OCEAN BLVD., APT. 601
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: VP () Delete
Name: DALE, VICKI
Address: 4600 S. OCEAN BLVD., APT. 601
City-St-Zip: HIGHLAND BEACH, FL 33487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONALD DALE

PRES

07/02/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date