

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 30, 2003 8:00 am**  
**Secretary of State**

04-30-2003 90315 026 \*\*\*150.00

0095420 FP

**DOCUMENT # P93000083654**

**1. Entity Name**  
**INTERNATIONAL COMMUNITY MARKETING, INC.**



**Principal Place of Business**  
**4037 METRIE DR STE 120**  
**WINTER PARK FL 32792**

**Mailing Address**  
**4037 METRIE DR STE 120**  
**WINTER PARK FL 32792**

**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

**4. FEI Number** **59-3214002**

Applied For  
Not Applicable

**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**VECCIA, DENNIS P**  
**120 UNIVERSITY PARK DRIVE**  
**SUITE 150**  
**WINTER PARK FL 32792**

**Name**  
**LOWMEES, DRASDICK DASTER KANTOR & REED**  
**Street Address (P.O. Box Number is Not Acceptable)**  
**215 N. EOLA DRIVE**  
**City** **ORLANDO** **FL** **Zip Code** **32802**

**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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing** ☐ **\$5.00 May Be Added to Fees**  
**Trust Fund Contribution.**

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	D	<input type="checkbox"/> Delete
NAME	CHARANI, AMMAR	
STREET ADDRESS	4037 METRIE DR STE 120	
CITY-ST-ZIP	WINTER PARK FL 32792	
TITLE	ST	<input type="checkbox"/> Delete
NAME	VECCIA, DENNIS P	
STREET ADDRESS	4037 METRIE DR STE 120	
CITY-ST-ZIP	WINTER PARK FL 32792	
TITLE	PD	<input type="checkbox"/> Delete
NAME	ALTAWAM, AREF	
STREET ADDRESS	4037 METRIC DRIVE - SUITE 120	
CITY-ST-ZIP	WINTER PARK FL 32792	
TITLE	I	<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	4037 METRIC DRIVE, SUITE 120	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	4037 METRIC DRIVE, SUITE 120	
CITY-ST-ZIP		
TITLE	CD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GEORGE PUIG	
STREET ADDRESS	4037 METRIC DRIVE, SUITE 120	
CITY-ST-ZIP	WINTER PARK, FL 32792	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**12. 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 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 #

CR2E034 (10/02)