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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000024339 (1)

ICP2, INC.

FILED
Mar 27 1997 8:00am
Secretary of State

| Automatic charac | e or paraments | Maiing Address | | | 1 | | | | | | |
|---------------------------------|--|--|------------------------------------|--------|--|--|------|---------------------------------------|------------------------|--------------------|--|
| P.O. BOX 5602 ORLANDO FL | | P.O. BOX 560279 ORLANDO FL 32856-0279 | | | | | | | | | |
| | | | | | | 3. Date Incorporated or Qualified 03/30/1994 | | 3a. Date of Last Report 04/01/1996 | | | |
| 2. Principa F | unité of Business | 2a. Mailing Address | · | | | 4. FEI Number | 1 | Ť | | hed For | |
| 21 | | 26 | | | | 13-3799330 | | | · | Applicable | |
| Suita, Apr. 22 | # _* (\$c : | Suite, Apt #, etc. | | | , | 5. Certificate of Status Desired | | | 75 Ao ee Reg | lditional ulred | |
| City & Star | ę* | City & State | · | • • | ······································ | 6. Election Campaign Financing | | \$5 | .00 M | lav Be | |
| 23 | | 28 | | | | Trust Fund Contribution | | | ided to | | |
| Ζιρ 24 | Country 25 | Zip [29] | | | | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No | | | | | |
| .621 | 9. Name and Address of Curre | | 1301 | | | 10. Name and Address of New Reg | | | | | |
| WAL | KER, H W JR | | 81 | Na | ne | | | | | | |
| | FIRST UNION FINANCIAL CEN | iter | 82 | Stre | et Addre | ss (P.O. Box Number is Not Acceptab | le) | | | ···· | |
| 200 | S BISCAYNE BOULEVARD | | | | | | | | ····· | | |
| MIA | MI FL 33131 | | 83 | | | | | | | | |
| | | | 64 | City | / | | E-1 | 85 | Zip Co | ode | |
| 44 D | to the control of the state of 7 and | 00 and 607 1500 Florida Status | ter the phove | | and corpo | oration submits this statement for the p | FL | | ina ite | ranietorad | |
| agent La SIGNATURE | an familiar with, and accept the oblg | pations of, Section 607.0505, FI | lorida Statute: *E: Registered Age | 3. | | on's board of directors. I hereby accept d when reinstating) | DATE | | | | |
| 12. | · · · · · · · · · · · · · · · · · · · | ID DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFFIC | | | | | |
| 1(1.F | Db | [_] DELETE | 1 1 TITLE | | | | | L Cha | agnı | Addition | |
| NAME AND SECOND | COHEN, MARK B PO BOX 395 CHURCH ST ST | ATION | 1.2 NAME 1.3 STREET | ADGDE | -00 | | | | | | |
| STREET ADDRESS OFFY: ST- ZPF | NY NY | Allon | 1.4 CITY - S | | 29 | | | | | | |
| 1d.r | V | DELETE | 21 TIBLE | | | | | Cha | ange | Addition | |
| NAME | MATTON, PETER V | | 2.2 NAME | | | | | | | | |
| STREET ADDRESS | PO BOX 395 CHURCH ST ST | ATION | 23 STREET | ADDRE | SS | | | | | | |
| CHY 51 74P | NY NY | | 2 4 CITY- | ST-ZIP | | | | | | | |
| 1(F | V SOUR MALLANA | ☐ DELETE | 3 1 TITLE | | ļ | | | Cha | ange | Addition | |
| NAMI | ROCHE, WILLIAM A PO BOX 395 CHURCH ST ST | ATION | 3.2 NAME | 4000 | | | | | | | |
| STREET ADDRESS OUTY - ST-788 | NY NY | ATION | 3.3 STREET 3.4 CITY-1 | | 22 | | | | | | |
| 111.6 | TS | DELE 1E | 4.1 TITLE | 31-211 | | | | ☐ Cha | ange | Addition | |
| NAM | FREILICH, PAUL A | | 4. 2 NAME | | | | | | | | |
| STREET ADDRESS. | PO BOX 395 CHURCH ST ST | ATION | 43 STREET | ADORE | :SS | | | | | | |
| CRY-SI ZP | NY NY | | 4.4 CITY - S | 1-21P | | | | | | | |
| Til f | V | DELETE | 5 1 TITLE | | | | | L] Cha | ange | Addition | |
| Mady | FRIEDRICH, HENRY | ATIAN | 5 2 NAME | | | | | | | | |
| S REFLADURES | PO BOX 395 CHURCH ST ST | AIIUN | 5.3 STREET | | SS | | | | | | |
| CHEY - ST - ZIP TITLE | NY NY V | DELETE | 5 4 CITY - 9 6 1 TITLE | 1-ZIP | | | | Cha | ange | Addition | |
| NAM | BUERGLER, MARCUS U | hand was a fin | 6.2 NAME | | | | | | | | |
| STREET ADORES | PO BOX 395 CHURCH ST ST | ATION | 6.3 STREET | ADDRE | ss | | | | | | |
| City - \$1 - 71P | NY NY | | 6.4 Cily - S | | | | | | | | |
| | | | | | | | | | | | |

14. I do hereby certly that the information supplied with this fing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the intermation indicated in 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 other or director of the corporation or the receiver or trustee employeed to execute this report as required by Chapter 607; Florida Statutes; and that my name appears in Block 12 or Block 12 of Block or on an attracting on which my address.

SIGNATURE:

uh dull mark coher

2/24/97

Saytimu Pirkinië k