2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2007
Secretary of State

DOCUMENT# P94000037508

Entity Name: ICON SUPPLY, INC.

Current Principal Place of Business:

PO BOX 272423
TAMPA, FL 33688 US

New Principal Place of Business:

11323 CAROLLWOOD DR
TAMPA, FL 33618 US

Current Mailing Address:

PO BOX 272423
TAMPA, FL 33688 US

New Mailing Address:

FEI Number: 59-3243571 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TEMPEST, NORMA C
11323 CARROLLWOOD DR
TAMPA, FL 33618 US

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: DPST ( ) Delete
Name: TEMPEST, NORMA
Address: 11323 CARROLLWOOD DR
City-St-Zip: TAMPA, FL

Title: D ( ) Delete
Name: TEMPEST, MARK
Address: 11323 CARROLLWOOD DR
City-St-Zip: TAMPA, FL

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 Chapter 119, 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: NORMA C. TEMPEST PRES 01/04/2007

Electronic Signature of Signing Officer or Director Date