FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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9. Name and Address of Current Registered Agent

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P94000051121	(9)
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 Corporation Name ICBM, INC. Mailing Address Principal Place of Business 7150 DEVENS ROAD. #12 RIVIERA BEACH FL 33404 7150 DEVENS ROAD. #12 RIVIERA BEACH FL 33404 3a. Date of Last Report 3. Date Incorporated or Qualified 07/12/1994 11/30/1995 4. FFI Number 2a. Mailing Address 2. Principal Place of Business 65-0522986 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 27 22 6. Election Campaign Financing City & State City & State 28 23 Co

MCCOLLUM, RICHARD 7150 DEVENS ROAD, #12 RIVIERA BEACH FL 33404

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Ζip

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	Trust Fund Contribution — Added to Fees				
untry	8. This corporation has liability for intangible tax under s 199.00 Florida Statutes Yes Yes No				
Τ	10. Name and Address of New Registered Agent				
81	Name				
82	Street Address (P.O. Box Number is Not Acceptable)				
83					
84	City FI 85 Zip Code				

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, Saction 607.0505, Florida Statutes.

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SIGNATURE _	Signature, typod or printed name of registered agent and the flag	plicable (NOTE:	Registereo Agent signature required	d when reinstating) DATE		
12. OFFICERS AND DIRECTORS			13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	DELFTE	1 1 TITLE	☐ Change	Addition	
NAME	MCCOLLUM, RICHARD		12 NAME			
STREET ADDRESS	7150 DEVENS ROAD, #12		1.3 STREET ADDRESS			
CITY-ST-ZIP	RIVIERA BEACH FL 33404		1.4 CHY-ST-ZIP			
TITLE	D	□ DELETE	2. 1 TITLE	☐ Change	Addition	
NAME	TANGUAY, GEORGE		2 2 NAME			
STREET ADDRESS	7150 DEVENS ROAD, #12		2 3 STREET ADDRESS			
CITY-ST-ZIP	RIVIERA BEACH FL 33404		2.4 CITY-ST-ZIP			
TITLE	D	☐ DELETE	. 3. 1 TITLE	☐ Change	☐ Addition	
NAME	CLEMMITT, D. ALLEN		3.2 NAME			
STREET ADDRESS	7150 DEVON RD. #12		3.3. STREET ADDRESS			
CITY-ST-ZIP	RIVIERA BCH. FL 33404		3.4 CiTY - ST - 7iP	P3.0	P-1 1444	
TITLE		DELETE	4 1 TITLE	Change	Addition	
NAME			4 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP	FT AL	- Addition	
TITLE		DELETE	5. 1 TITLE	Change	Addition	
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-7IP	F1.04	CT Addition	
TITLE		☐ DELETE	6. 1 TITLE	[_] Change	Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 cath; 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:

RE AND TYPED OR PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-70-96 Date

CR2E034 (12/95)

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Not Applicable