

# 2000 UNIFORM BUSINESS REPORT (UBR)

182

DOCUMENT # P94000068888

1. Entity Name

FILED

01 SEP 26 AM 8:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business: **1591 E. Atlantic Blvd. Suite 200 Pompano Beach, FL 33060**  
Mailing Address: **1591 E. Atlantic Blvd Suite 200 Pompano Beach, FL 33060**

2. Principal Place of Business: Suite, Apt. #, etc.  
3. Mailing Address: Suite, Apt. #, etc.  
City & State: \_\_\_\_\_  
City & State: \_\_\_\_\_  
Zip: \_\_\_\_\_ Country: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

4. FEI Number: **65-0520802** Applied For:  Not Applicable:   
5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**Carlton Management Inc.  
1591 E. Atlantic Blvd.  
Suite 200  
Pompano Beach, FL 33060**

7. Name and Address of New Registered Agent  
Name: \_\_\_\_\_  
Street Address (P.O. Box Number is Not Acceptable): \_\_\_\_\_  
City: **FL** Zip Code: \_\_\_\_\_

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.  
SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS	
TITLE: <b>PST</b> <input type="checkbox"/> Delete	NAME: <b>ROBINSON, PHIL</b>
STREET ADDRESS: <b>1591 E. Atlantic Blvd. Ste 200</b>	CITY-ST-ZIP: <b>Pompano Beach, FL 33060</b>
TITLE: _____ <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 type="checkbox"/> Delete	NAME: _____
STREET ADDRESS: _____	CITY-ST-ZIP: _____

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
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: _____
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: _____

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_\_\_\_\_ Date: **9/20/01** Daytime Phone #: **954-943-1498**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)



**INTERNATIONAL COMPANY  
SERVICES (USA) INC.**

*Providing International Business Consulting Since 1979*

Atlantic Professional Building  
1591 East Atlantic Blvd.  
Suite 200  
Pompano Beach, Florida  
U.S.A. 33060

Telephone: (954) 943-1498  
Facsimile: (954) 943-1499  
E-mail: usa@icsl.com

September 20, 2001

Uniform Business Report  
Division of Corporations  
P O Box 1500  
Tallahassee, FL 32302-1500

**RE: INTERNATIONAL COMPANY SERVICES (USA) INC.**

Dear Sir or Madam:

My assistant has brought to my attention that we have not submitted Year 2001 UBR report for subject company. However, this letter is to advise you that we never received the preprinted UBR report that is normally sent each year from the Dept. of State, and if it were not for my secretary I believe this would have gone unnoticed.

In a good faith effort to rectify this situation I have immediately prepared a blank UBR Report and enclose our check for \$150.00. I trust your penalty fees will be waived in this instance. As evidenced by this letterhead we are an existing and operational business for many years and it was not our intention to bring any jeopardy to this incorporation.

Your kind confirmation regarding this matter is most appreciated. Thank you in advance for your anticipated considerations.

Sincerely,  
FOR INTERNATIONAL COMPANY SERVICES (USA) LLC

*Suzie Cadenas*  
Suzie Cadenas, Manager

Encl