FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT 1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000075661 (6)

1. Corporation Name
I-CON SYSTEMS, INC.

Principal Place of Business
3065 LOWERY DR
OVIEDO FL 32765

Mailing Address
~~3065 LOWERY DR~~
~~OVIEDO FL 32765~~

3. Date Incorporated or Qualified: 01/06/1994
3a. Date of Last Report: 08/07/1995
4. FEI Number: 59-3272931 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business
21 1724 W. BROADWAY
Suite, Apt. #, etc
22
City & State
23 OVIEDO, FL
Zip
24 32765
Country
25

2a. Mailing Address
26 SAME A 2
Suite, Apt. #, etc
27
City & State
28
Zip
29
Country
30

9. Name and Address of Current Registered Agent
BUSH, SHAWN D
3065 LOWERY DR
OVIEDO FL 32765

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 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, Section 607.0505, Florida Statutes.

SIGNATURE [signature] 7-30-96
Signature, typed or printed name of registered agent and title if applicable (N. B. Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
D	BUSH, SHAWN D	3065 LOWERY DR	OVIEDO FL 32765	☐ DELETE
D	SWEENEY, THOMAS	3182 HOWARD DR	OVIEDO FL 32765	☐ DELETE
D	MALONE, DENNIS	7425A DANIEL WEBSTER	WINTER PARK FL 32792	☐ DELETE
				☐ DELETE
				☐ DELETE
				☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
1					☐ Change ☐ Addition
2					☐ Change ☐ Addition
3					☐ Change ☐ Addition
4					☐ Change ☐ Addition
5					☐ Change ☐ Addition
6					☐ Change ☐ Addition

CR2E034 (12/95)

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)(i), 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] Shawn Bush DIRECTOR/PRESIDENT 7-30-96 400-365-6241
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #