

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 # P95000025583 (2)

1. Corporation Name

INTERNET COMMUNICATIONS OF AMERICA, INC.

Principal Place of Business

Mailing Address

2999 N.E. 194TH STREET
SUITE 408
MIAMI FL 33180

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SUITE 408
MIAMI FL 33180



000001834330
-05/22/96--01037--051
***200.00

3. Date Incorporated or Qualified
03/30/1995

3a. Date of Last Report

N/A

4. FEI Number

65-0570711

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CAHAN, RICHARD J. A
200 S. BISCAYNE BLVD.
SUITE 3050
MIAMI FL 33131-2394

81. Name

Richard J. Alan Cahan, Esq.

82. Street Address (P.O. Box Number is Not Acceptable)

c/o Becker & Poliakoff, P.A.

83.

5201 Blue Lagoon Drive, Suite 100

84. City

Miami

FL

85. Zip Code

33126

11. Pursuant to the provisions of Sections 607.0507 and 607.1505, 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, typed or printed name of registered agent, and title if applicable

NOTE: Registered Agent signature required when re-stating

DATE

Richard J. ALAN CAHAN 4/26/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	☐ DELETE
NAME	HURWITZ, ELMER	
STREET ADDRESS	% 2999 N.E. 194TH STREET, SUITE 408	
CITY-ST-ZIP	MIAMI FL 33180	
TITLE	D	☐ DELETE
NAME	HURWITZ, ROBERT	
STREET ADDRESS	% 2999 N.E. 194TH STREET, SUITE 408	
CITY-ST-ZIP	MIAMI FL 33180	
TITLE	D	☐ DELETE
NAME	NEPTUNE, JOANNE	
STREET ADDRESS	% 2999 N.E. 194TH STREET, SUITE 408	
CITY-ST-ZIP	MIAMI FL 33180	
TITLE	D	☒ DELETE
NAME	GOLDSTEIN, JEFFREY	
STREET ADDRESS	% 2999 N.E. 194TH STREET, SUITE 408	
CITY-ST-ZIP	MIAMI FL 33180	
TITLE	D	☐ DELETE
NAME	TAHT, MICHAEL	
STREET ADDRESS	% 2999 N.E. 194TH STREET, SUITE 408	
CITY-ST-ZIP	MIAMI FL 33180	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	1020 NW 163 RD DR
1.4 CITY-ST-ZIP	NORTH MIAMI, FL 33169
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	1020 NW 163 RD DR
2.4 CITY-ST-ZIP	NORTH MIAMI, FL 33169
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	1020 NW 163 RD DR
3.4 CITY-ST-ZIP	NORTH MIAMI, FL 33169
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	DELETE
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	1020 NW 163 RD DR
5.4 CITY-ST-ZIP	NORTH MIAMI, FL 33169
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert Hurwitz

4/25/96 305 621-9200

Date

Daytime Phone #

CR2E034 (12/95)