

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 22, 2006 8:00 am
Secretary of State

02-22-2006 90002 025 ***158.75

DOCUMENT # P95000056362

1. Entity Name

INTERMEDIARY CONSULTANTS GROUP, INC.



Principal Place of Business
5801 FOUNTAIN DR. S.
LAKE WORTH FL 33467
US

Mailing Address
5801 FOUNTAIN DR. S.
LAKE WORTH FL 33467
US



2. Principal Place of Business

1551 N. Flagler Dr.

Suite, Apt. #, etc.
#1116

City & State
West Palm Beach, FL

Zip
33401

Country
US

3. Mailing Address

1551 N. Flagler Dr.

Suite, Apt. #, etc.
#1116

City & State
West Palm Beach, FL

Zip
33401

Country
US

1st MOORE

CR2E034 (10/05)

4. FEI Number

65-0593421

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CECCHINI, WALTER R.
5801 FOUNTAIN DR. S.
LAKE WORTH FL 33467

7. Name and Address of New Registered Agent

Name Walter R. Cecchini Jr.

Street Address (P.O. Box Number is Not Acceptable)
1551 N. Flagler Dr. #1116

City West Palm Beach FL Zip Code 33401

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reconstituting)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME CECCHINI, WALTER R.
STREET ADDRESS 5801 FOUNTAIN DR. S
CITY-ST-ZIP LAKE WORTH FL 33467

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President ☒ Change ☐ Addition
NAME Walter R. Cecchini Jr.
STREET ADDRESS 1551 N. Flagler Dr. #1116
CITY-ST-ZIP West Palm Beach, FL 33401

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Walter R. Cecchini Jr.

Date

Daytime Phone #

(561) 837-9201