## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000057363 (0)

ICELAND, INC.

## FILED Apr 29 1997 8:00am Secretary of State

Principal Place of Business Mailing Address  2253 LINCOLN STREET 3253 LINCOLN STREET HOLLYWOOD FL 33021 HOLLYWOOD FL 33021-8147					
			· ·	Date Incorporated or Qualified 07/24/1995	3a. Date of Last Report 07/19/1996
2. Principal Pi	3 LINOW \$7	28. Mailing Address 26 3253 LIW	coln ST.	4. FEI Number 65-0607188	Applied For Not Applicable
Suite, Apt	#, etc. <b>/A</b>	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	1 17	City & State	d FL	B. Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country Country	29 33021-6147	Country 30 USA	8. This corporation has liability for	
1 350	9. Name and Address of Curre		30) 0 277	10. Name and Address of New Re	
3253 HOLI	E, DANIEL LUNCOLN STREET LYWOOD FL 33021		83 84 City	ress (P.O. Box Number is Not Accepta	FL 85 Zip Code
office or n agent. I at SIGNATURE	egistered agent, or both, in the Stat in familiar with, and accept the oblig Square reproductions of registered as OFFICERS At	e of Florida Such change was all gations of, Section 607.0505, Flor port and life if applicable (NOTE NO DIRECTORS	uthorized by the corporatida Statutes.  Registered Agent signature requirements.	ion's board of directors. I hereby acce	pt the appointment as registered  DATE  CERS AND DIRECTORS IN 12
TILE NAME STREET ADDRESS ( DITY-ST_ZIP	D COTE, DANIEL 3253 LINCOLN STREET HOLLYWOOD FL 33021	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP		Change
itle Iame Taeel address Ity (SI-74)		☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-SY-ZIP		Change Addition
ITLE FAME STREET ADDRESS OTY: S1: ZIP		☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS		☐ Change ☐ Additio
itle IAME Thee! Altoress		☐ DELETE	3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS		Change Addition
OTY - ST - ZIP OTLE IAME STREET ADDRESS		☐ DELETE	4.4 CITY - ST - ZIP 5.1 YITLE 5.2 NAME 5.3 STREET ADDRESS		☐ Change ☐ Additio
IAMI STREET ADDRESS		☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY ST. 7D		Change Additio
THE NAME STREET ADDRESS CHY-ST-ZIP 14. I do heret intornatio	on indicated on this annual report or	ed with this filing does pet dalify supplemental appropriate	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP for the exemption states up and accurate and that	d in Section 119.07(3)(i), Florida Stat my signature shall have the same le thas required by Chapter 607, Florid	eat

SIGNATURE:

ONATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRE

4/22/9

(954) 966-3004

trie Phone #