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Jan 28 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000059604 (5)

1. Corporation Name

INFORMED COMMUNICATION SYSTEMS, INC.

Principal Place of Business

2200 WEST COMMERCIAL BLVD.
SUITE 300
FT. LAUDERDALE FL 33309

Mailing Address

2200 WEST COMMERCIAL BLVD.
SUITE 300
FT. LAUDERDALE FL 33309-7116



3. Date Incorporated or Qualified

07/31/1995

3a. Date of Last Report

07/11/1996

4. FEI Number

65-0601765

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

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 305
City & State

27 305
City & State

23 Zip Country

28 Zip Country

24

29

30

9. Name and Address of Current Registered Agent

LAVENDER, JOEL R
507 SOUTHEAST 11TH COURT
FT., LAUDERDALE FL 33316

10. Name and Address of New Registered Agent

81 Name

DAVID VALDES

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

2200 WEST COMMERCIAL BLVD

83

SUITE 300

84 City

FT. LAUDERDALE

FL

85 Zip Code

33309

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 607.0502, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME ZIMMERMAN, JORDAN
STREET ADDRESS 2200 W. COMMERCIAL BLVD. #300
CITY - ST - ZIP FT. LAUDERDALE FL 33309 ☐ DELETE

TITLE STD
NAME VALDES, DAVID
STREET ADDRESS 2200 W. COMMERCIAL BLVD. #300
CITY - ST - ZIP FT. LAUDERDALE FL 33309 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☒ Addition
3.2 NAME V.D.
3.3 STREET ADDRESS laugh ridge, Terry
3.4 CITY - ST - ZIP 2200 W. COMMERCIAL BLVD #300
FT. LAUDERDALE, FL 33309

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID VALDES

1/16/97

Date

954-731-2900

Daytime Phone #

CR2E034 (9/96)