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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000092059 (1)

ICS GROUP, INC.

Principal Place of basiness Mailing Address

**FILED** Mar 12 1997 8:00am Secretary of State

2148 5TH AVENUE VERO BEACH FL 32960		2146 5TH AVENUE VERO BEACH FL 32960-5159						
					3. Date Incorporated or Qualified 12/01/1995		of Last R <b>2/1996</b>	leport
2. Principal Pia	ace of Business	2a. Mailing Address			4. FEI Number			oplied For
21		26			65-0625407		<del> + +</del>	ot Applicable
Suite, Apt #	<b>⊭</b> , € (t).	Suite, Apt #, etc			5. Certificate of Status Desired			Additional equired
City & State 23		City & State			Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zφ <b>24</b>	Ζιρ 	Country 30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
	9. Name and Address of Cu	rrent Registered Agent		····	10. Name and Address of New Re	istered Ag	ent	
MUR	PHY, LEWIS W JR.,ESQ		61	Name				
817	is, Henderson, van Gaa: Beachland Blvd.	SBECK, ET AL	82		ress (P.O. Box Number is Not Acceptab	le)		
VERO	D BEACH FL 32983		83					
			84	City		FL	<b>85</b> Zip	Code
office or re agent. Fan SIGNATURE	sgistered agent, or born, in the s in familiar with, and accept the c	bligations of, Section 607.0505, F	iorida Statute	<b>S</b> .	ition's board of directors. I hereby acception is board of directors. I hereby acception in the control of the	DATE DATE	itment as	registered
12.		AND DIRECTORS	13.	ent signature requ	ADDITIONS/CHANGES TO OFFIC		IBECTOE	RS IN 12
10 F	n	DELETE	1 1 TITLE		ADDITIONO/OF ANTOLO TO OFFICE		Change	Addition
NAME	SEARCY, STERLING J		12 NAME	İ		-	2	
SOREFT ADDRESS.	2146 5TH AVENUE			F ADDRESS				
OTY 51-73	VERO BEACH FL 32960		1.4 CITY-	1				
T TLF	0	DELETE	2 1 TITLE	J. L.			Change	Addition
NAME	SEARCY, IRENE	_	2.2 NAME				_ •	
STREET ADOREON	2146 5TH AVENUE		2.3 STREE	T ADDRESS				
OHY 51 28	VERO BEACH FL 32960		2. 4 CiTY -	ST-ZIP				
DILE		DELETE	3.1 TITLE			194	Change	Addition
NAME			3.2 NAME	1				
STEELT ALCIBESS			3.3 STREE	T ADDRESS				
Offy St. Zill			3.4. CITY-	ST-ZIP				
TUTLE		DELETE	4.1 TITLE				Change	Addition Addition
NAME			4. 2 NAME					
STREET ACORDS			4.3 STREE	ADDRESS				
01x S1 7P			4.4 CiTY -	ST-ZIP				
TI'LE		☐ DELETE	5.1 TITLE			[	Change	Addition
NAME			5.2 NAME					
SPRET ADDRESS.			5.3 STREE	ADDRESS				
C-TY- S1 - 20F			5.4 CITY-	ST-ZIP				
TITE		DELETE	6.1 1ffLE				Change	Addition
NAV-			6.2 NAME	-				
STREET ADD *****			6.3 STREE	f address				
City St 26			6.4 CITY -	ST-ZIP				

14. I do hereby could that the information supplied with this hing 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: