PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90236 025 ***150.00

DOCUMENT

1. Corporation Name

| | IC FINANCIAL SEHVICES, I | INC. | | | | |
|--|---|--|---|---|----------------------------------|--|
| Principal Place | of Business | Mailing Address | | | AII) BOLAS HON OSOSO | 11881 1811 1881 |
| | | 3015 EXCHANGE CT. | | | | |
| 3015 EXCHANGE CT. 3015 EXCHA STE. A STE. A | | | | | • | |
| WEST PALM BEACH FL 33409 WEST PALM BEACH FL 33409 | | 409 | DO NOT WRITE IN THIS SPACE | | | |
| us us | | | 3. Date Incorporated or Qualifed | | | |
| _ | | | | 01/01/1996 | | |
| 2. Principal Pl | ace of Business | 2a. Mailing Address | | 4. FEI Number | | olied For |
| 21 | <u> </u> | 26 | | 65-0633103 | | Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | 5. Certifcate of Status Desired | \$8.75 A Fee Re | |
| 22 | | 27 | | - | | · |
| City & State | e | City & State | | 6. Election Campaign Financing | \$5.00 (Added to | |
| 23 | Occuptor | | Country | Trust Fund Contribution | | J F668 |
| Zip | Country | Zip | - | This corporation owes the current year Personal Property Tax. | ⊓ rintangible ☐ Yes | X No |
| 24 | 9. Name and Address of Currer | | 30 | 10. Name and Address of New Register | | |
| | 9. Name and Address of Curren | it itegistered Agent | 81 Name | 10. 11 | | |
| BRO | OKER, MARVIN C | | | | | |
| | EXCHANGE CT. | | 82 Street Add | ress (P.O. Box Number is Not Acceptable) | | |
| STE. | | | 83 | | | |
| | PALM BCH. FL 33409 | | | | | |
| | 4 | | 84 City | | = | Code |
| 44 Purcuant | to the provisions of Sections 607 (650 | 2 and 607 1508 Florida Statute | es the above-named corr | | | registered |
| office or re | egistered agent, or both, in the State | of Florida. Such change was au | thorized by the corporati | poration submits this statement for the purpost ion's board of directors. I hereby accept the ap | ppointment as reg | gistered |
| i agent. Lar | m taranaran kacamatan kelopiga | tions ot oection 607.0000, Fior | iga Statutes. | | | |
| 3/ | ////////////////////////////////////// | nn. | 17.1 ms 1 2 | 200/100 1/20/1 | 949 | |
| SIGNATURE | MARCONO . | | Registered Agent signature require | DOKER 1/22/1 | 999 | <u>. </u> |
| SIGNATURE | Signatore, typed or printed name of registered age | | RYIN C. KE | DOKER 1/22/1 | 999 | <u> </u> |
| SIGNATURE | Signatore, typed or printed name of registered age | nt and title if applicable. (NOTE: | Registered Agent signature require | OOKER 1/28/1 ed when rekistating) DATE | 999 | <u> </u> |
| SIGNATURE | Signated, typed or printed name of registered age OFFICERS AN | nt and title if applicable. (NOTE: | Registered Agent signature require 13. | OOKER 1/28/1 ed when rekistating) DATE | 999 S AND DIRECTO | RS IN 12 |
| SIGNATURE 12. TITLE | Signators, typed or printed name of registered age OFFICERS AN | nt and title if applicable. (NOTE: | Reystered Agent signature require 13. 1.1 TITLE | OOKER 1/28/1 ed when rekistating) DATE | 999 S AND DIRECTO | RS IN 12 |
| SIGNATURE 12. TITLE NAME STREET ADDRESS | Signators, typed or printed name of registered age OFFICERS AN PTD TIPTON, DANIEL B 301F SEA OATS DRIVE | nt and title if applicable. (NOTE: | Registered Agent signature require 13. 1.1 TITLE 1.2 NAME | OOKER 1/28/1 ed when rekistating) DATE | 999 S AND DIRECTO | RS IN 12 |
| SIGNATURE 12. TITLE NAME | Signators, typed or printed name of registered age OFFICERS AN PTD TIPTON, DANIEL B | nt and title if applicable. (NOTE: | Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS | OOKER 1/28/1 ed when rekistating) DATE | 999 S AND DIRECTO | RS IN 12 |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP | Signator, typed or printed name of registered age OFFICERS AN PTD TIPTON, DANIEL B 301F SEA OATS DRIVE JUNO BEACH FL VSD | nt and title if applicable. (NOTE: ND DIRECTORS | Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 GITY-ST-ZIP | OOKER 1/28/1 ed when rekistating) DATE | AND DIRECTO Change | RS IN 12 |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | Signature, typed or printed name of registered age OFFICERS AN PTD TIPTON, DANIEL B 301F SEA OATS DRIVE JUNO BEACH FL VSD BROOKER, MARVIN C | nt and title if applicable. (NOTE: ND DIRECTORS | Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE | OOKER 1/28/1 ed when rekistating) DATE | AND DIRECTO Change | RS IN 12 |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | Signature, typed or printed name of registered age OFFICERS AN PTD TIPTON, DANIEL B 301F SEA OATS DRIVE JUNO BEACH FL VSD BROOKER, MARVIN C 1403 E. LIBBY DRIVE | nt and title if applicable. (NOTE: ND DIRECTORS | Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME | OOKER 1/28/1 ed when rekistating) DATE | AND DIRECTO Change | RS IN 12 Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | Signature, typed or printed name of registered age OFFICERS AN PTD TIPTON, DANIEL B 301F SEA OATS DRIVE JUNO BEACH FL VSD BROOKER, MARVIN C | nt and title if applicable. (NOTE: ND DIRECTORS | Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS | OOKER 1/28/1 ed when rekistating) DATE | AND DIRECTO Change | RS IN 12 |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | Signature, typed or printed name of registered age OFFICERS AN PTD TIPTON, DANIEL B 301F SEA OATS DRIVE JUNO BEACH FL VSD BROOKER, MARVIN C 1403 E. LIBBY DRIVE | nt and title if applicable. (NOTE: | Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP | OOKER 1/28/1 ed when rekistating) DATE | AND DIRECTO Change | RS IN 12 Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | Signature, typed or printed name of registered age OFFICERS AN PTD TIPTON, DANIEL B 301F SEA OATS DRIVE JUNO BEACH FL VSD BROOKER, MARVIN C 1403 E. LIBBY DRIVE | nt and title if applicable. (NOTE: | Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 GITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADORESS 2.4 CITY-ST-ZIP 3.1 TITLE | OOKER 1/28/1 ed when rekistating) DATE | AND DIRECTO Change | RS IN 12 Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME | Signature, typed or printed name of registered age OFFICERS AN PTD TIPTON, DANIEL B 301F SEA OATS DRIVE JUNO BEACH FL VSD BROOKER, MARVIN C 1403 E. LIBBY DRIVE | nt and title if applicable. (NOTE: | Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADORESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME | OOKER 1/28/1 ed when rekistating) DATE | AND DIRECTO Change | RS IN 12 Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS | Signature, typed or printed name of registered age OFFICERS AN PTD TIPTON, DANIEL B 301F SEA OATS DRIVE JUNO BEACH FL VSD BROOKER, MARVIN C 1403 E. LIBBY DRIVE | nt and title if applicable. (NOTE: | Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADORESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS | OOKER 1/28/1 ed when rekistating) DATE | AND DIRECTO Change | RS IN 12 Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP | Signature, typed or printed name of registered age OFFICERS AN PTD TIPTON, DANIEL B 301F SEA OATS DRIVE JUNO BEACH FL VSD BROOKER, MARVIN C 1403 E. LIBBY DRIVE | nt and title if applicable. (NOTE: NOTE: N | Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP | OOKER 1/28/1 ed when rekistating) DATE | AND DIRECTO Change Change | RS IN 12 Addition Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | Signature, typed or printed name of registered age OFFICERS AN PTD TIPTON, DANIEL B 301F SEA OATS DRIVE JUNO BEACH FL VSD BROOKER, MARVIN C 1403 E. LIBBY DRIVE | nt and title if applicable. (NOTE: NOTE: N | Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADORESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE | OOKER 1/28/1 ed when rekistating) DATE | AND DIRECTO Change Change | RS IN 12 Addition Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | Signature, typed or printed name of registered age OFFICERS AN PTD TIPTON, DANIEL B 301F SEA OATS DRIVE JUNO BEACH FL VSD BROOKER, MARVIN C 1403 E. LIBBY DRIVE | nt and title if applicable. (NOTE: NOTE: N | Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADORESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME | OOKER 1/28/1 ed when rekistating) DATE | AND DIRECTO Change Change Change | RS IN 12 Addition Addition Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | Signature, typed or printed name of registered age OFFICERS AN PTD TIPTON, DANIEL B 301F SEA OATS DRIVE JUNO BEACH FL VSD BROOKER, MARVIN C 1403 E. LIBBY DRIVE | nt and title if applicable. (NOTE: NOTE: N | Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADORESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS | OOKER 1/28/1 ed when rekistating) DATE | AND DIRECTO Change Change | RS IN 12 Addition Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP | Signature, typed or printed name of registered age OFFICERS AN PTD TIPTON, DANIEL B 301F SEA OATS DRIVE JUNO BEACH FL VSD BROOKER, MARVIN C 1403 E. LIBBY DRIVE | Int and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE | Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP | OOKER 1/28/1 ed when rekistating) DATE | AND DIRECTO Change Change Change | RS IN 12 Addition Addition Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME | Signature, typed or printed name of registered age OFFICERS AN PTD TIPTON, DANIEL B 301F SEA OATS DRIVE JUNO BEACH FL VSD BROOKER, MARVIN C 1403 E. LIBBY DRIVE | Int and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE | Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.1 TITLE | OOKER 1/28/1 ed when rekistating) DATE | AND DIRECTO Change Change Change | RS IN 12 Addition Addition Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | Signature, typed or printed name of registered age OFFICERS AN PTD TIPTON, DANIEL B 301F SEA OATS DRIVE JUNO BEACH FL VSD BROOKER, MARVIN C 1403 E. LIBBY DRIVE | Int and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE | Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME | OOKER 1/28/1 ed when rekistating) DATE | AND DIRECTO Change Change Change | RS IN 12 Addition Addition Addition Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | Signature, typed or printed name of registered age OFFICERS AN PTD TIPTON, DANIEL B 301F SEA OATS DRIVE JUNO BEACH FL VSD BROOKER, MARVIN C 1403 E. LIBBY DRIVE | Int and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE | Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.5 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS | OOKER 1/28/1 ed when rekistating) DATE | AND DIRECTO Change Change Change | RS IN 12 Addition Addition Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP | Signature, typed or printed name of registered age OFFICERS AN PTD TIPTON, DANIEL B 301F SEA OATS DRIVE JUNO BEACH FL VSD BROOKER, MARVIN C 1403 E. LIBBY DRIVE | Int and title if applicable. (NOTE: NO DIRECTORS DELETE DELETE | Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP | OOKER 1/28/1 ed when rekistating) DATE | AND DIRECTO Change Change Change | RS IN 12 Addition Addition Addition Addition |

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I 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, with all other like empowered.

SIGNATURE: