

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2004 8:00 am
Secretary of State

03-12-2004 90031 028 ***150.00

DOCUMENT # P96000006042 1. Entity Name INTERCAR CORP.			
Principal Place of Business 621 E CAPE CORAL PKWY CAPE CORAL, FL 33904		Mailing Address 621 E CAPE CORAL PKWY CAPE CORAL, FL 33904 US	
2. Principal Place of Business 1505 S.E. 40th Street Suite, Apt. #, etc. Suite C City & State Cape Coral, FL Zip 33904		3. Mailing Address 1505 S.E. 40th Street Suite, Apt. #, etc. Suite C City & State Cape Coral, FL Zip 33904	
6. Name and Address of Current Registered Agent ENGEL, WILHEM 621 EAST CAPE CORAL PKWY. CAPE CORAL, FL 33904		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1306 SE 46th Lane Suite Suite 3 City Cape Coral FL Zip Code 33904	
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 _____ DATE _____ (Signature, typed or printed name of registered agent and date if applicable) (NOTE: Registered Agent signature required when re-registering)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution: ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD BUEHLER, WOLFGANG 5336 SW 8TH COURT CAPE CORAL, FL 33914	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. 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 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: 		Date: Feb. 28, 2004 (239) 549-9499	