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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of ate DIVISION OF CORPORATIONS

DOCUMENT # P96000016260 (7)

J. ICON CORPORATION

| Principal Place of Business | Mailing Address | | | |
|-----------------------------|----------------------------|--|--|--|
| 76 EAST PALM DRIVE | 76 EAST PALM DRIVE | | | |
| FLORIDA CITY FL \$3034 | FLORIDA CITY FL 33034-3507 | | | |

APPROVED AND FILED

1997 JUN 23 AM 11: 59

SECRETARY OF STATE TALLAHASSEE, FLORIDA



| Principal Place of Business Mailing Address | | | | | 1 (401) 881 718 (81) 8 8111 8811 8811 8811 | WEIRS UNIT UNIT ICENE |
|---|---|---|--|-----------------------------|---|------------------------------------|
| 76 EAST PALM DRIVE 76 EAST PALM DRIVE FLORIDA CITY FL \$3034 FLORIDA CITY FL 33034-3507 | | | | | | |
| | | | | | 3. Date Incorporated or Qualified 02/21/1996 | 3a. Date of Last Report |
| | lace of Business | 2a. Mailing Addre | ess | | 4. FEI Number | Applied For |
| Sulte, Apt. | # ala | 26 Suite, Apt #, | oto | | 65-0717926 | Not Applicable |
| 22 | π, σις. | 27] | CiC. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & State | 9 | City & State | | | 6. Election Campaign Financing | \$5.00 May Be |
| Zip | Country | 7ip | Сош | ntrv | Trust Fund Contribution | Added to Fees |
| 24 | 25 | 29 | 30 | , | 8. This corporation has liability for Florida Statutes | Yes No |
| | 9. Name and Address of Curr | ent Registered Agent | | | 10. Name and Address of New Re | gistered Agent |
| | ICUS, MICHAEL J ESQ. | | | 81 Name | John Ivonomon | |
| 317 NORTH KROME AVENUE | | | | 82 Street Add | ess (P.O. Box Number is Not Acceptab | 2 |
| HOW | NESTEAD FL 33030 | | | 83 | g East fulm | Drive |
| | • | | Į | | | |
| | | | | B4 City | ile CH- | FL 85 Zip Code 7 9 |
| 11. Pursuant | to the provisions of Sections 607.09 | 002 and 607.1508, Florid | la Statutes, the ab | ove-named corp | poration submits this state nent for the p | surpose of changing its registered |
| office or r agent. 1 a | egistered agent, of both, in the Sta m familia with, and accept the offi | le of Florida. Such chang igations of, Section 607.0 | ge was authorized 0505, Florida Stati | I by the corporal lites. | poration submits this statement for the p tion's board of directors. Thereby accep | of the appointment as registered |
| SIGNATURE | Lehn cl | lanour | | | | 5/1/17 |
| | Signature, tried or printed name of registered a | | | Agent signature requi | | DAT |
| 12. TITLE | D OFFICERS A | ND DIRECTORS DE | 13. LETE 1.1 TIT | IF T | ADDITIONS/CHANGES TO OFFIC | Change Addition |
| NAME | ICONOMOU, JOHN | | 1.2 NA | - | | |
| STREET ADDRESS | 76 EAST PALM DRIVE | | 1.3 ST | REET ADDRESS | 5000023 | 97-01085- <u>010</u> |
| CITY-ST-ZIP | FLORIDA CITY FL 33034 | | 1.4 C/I | Y-ST-ZIP | -06/25/ | 9701055010 |
| TITLE | | ☐ D€ | LETE 21 1/1 | LE | ※非非年115 | 5.00 中央的表 16页如hion |
| NAME | | | 22 NA | ME | | |
| STREET ADDRESS | | | | REET ADDRESS | | |
| CITY-ST-ZIP TITLE | | DE | | TY-ST-7IP | | Change Addition |
| NAME | | ر الد | 3.2 NA | ſ | | Change Li Addition |
| STREET ADDRESS | | | | REET ADDRESS | | |
| CITY-ST-ZIP | | | | TY-ST-ZIP | | |
| TITLE | | ☐ DE | | | | Change Addition |
| NAME | | | 4. 2 N/ | INE | | |
| STREET ADDRESS | • | | | REE1 ADDRESS | | |
| CITY-ST-ZIP | | | | Y-ST-ZIP | | [] (6.0 [] 1.0.0 |
| TITLE | | DEC | | | | Change Addition |
| NAME STREET ADDRESS | | | 5.2 NA | ME REET ADDRESS | | |
| CITY-ST-ZIP | | | | Y-ST-ZIP | | |
| TITLE | | DE | | | | ☐ Change ☐ Modilion |
| NAME | | ·. · · | 6.2 NA | | | . N. |
| STREET ADDRESS | | | 6351 | REET ADDRESS | | 101,2/07 |
| CITY-ST-7IP | | | 6400 | Y-\$T-7IP | | 7.1100 |

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 ennual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.