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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600057343

INTERNATIONAL CREDIT CORP.

Mailing Address Principal Place of Business 7380 SAND LAKE ROAD 7380 SAND LAKE ROAD SUITE 350 SHITE 350 DO NOT WRITE IN THIS SPACE ORLANDO FL 32819 ORLANDO FL 32819 3. Date Incorporated or Qualifed 07/03/1996 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address Not Applicable 59-3447720 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. X 5. Certificate of Status Desired Fee Required 22 \$5:00 May Be City & State City & State --6. Election Campaign Financing Added to Fees Trust Fund, Contribution 23 28 Country Zip Zip Country 8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes MNo 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 SIEGEL, ALAN A Street Address (P.O. Box Number is Not Acceptable) 7380 SAND LAKE ROAD SUITE 350 83 ORLANDO FL 32819 Zip Code City 85 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 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable CR2E034 (11/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ☐ Addition DELETE Change TITLE 11TITLE D SIEGEL, ALAN A 1.2 NAME Alan A NAME 714 WOODWARD STREET 1.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32803 1.4 CITY-ST-ZIP CITY-ST-ZIP [] Addition Change DELETE 2.1 TITLE TITLE 22 NAME NAME 2.3 STREET ADORESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP Addition (C) Change - DELETE 3.1-TITLE -TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition □ DELETE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Change ☐ Addition 5.1 TITLE TITLE 5.2 NAME NAME

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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

61 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

4-26-99

40) 301-001

☐ Change

Addition

FILED

May 04, 1999 8:00 am Secretary of State

05-04-1999 90026 002 ***158.75