


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

FILED  
Mar 23 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000062362 (4)**  
1. Corporation Name  
**INTERNATIONAL COMMERCIAL CONNECTION, INC.**



Principal Place of Business <b>10201 NW 3RD COURT PEMBROKE PINES FL 33026</b>	Mailing Address <b>10201 NW 3RD COURT PEMBROKE PINES FL 33026</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>3504 SW 173RD TER.</b> Suite, Apt. #, etc. 22 City & State 23 <b>MIRAMAR, FL</b> Zip 24 <b>33029-1616</b>		2a. Mailing Address 26 <b>3504 SW 173RD TERRACE</b> Suite, Apt. #, etc. 27 City & State 28 <b>MIRAMAR, FL</b> Zip 29 <b>33029-1616</b>		3. Date Incorporated or Qualified <b>07/25/1996</b>	
		4. FEI Number <b>65-0707907</b>		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent

**MESSIAS ESTANISLAW, MARIA D**  
**10201 NW 3RD COURT**  
**PEMBROKE PINES FL 33026**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	<b>3504 SW 173RD TERRACE</b>
83	
84 City	<b>MIRAMAR</b>
85 State	<b>FL</b>
86 Zip Code	<b>33029-1616</b>

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**2/19/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b>	1.1 TITLE	<b>MESSIAS ESTANISLAW, MARIA D.</b>
NAME	<b>MESSIAS, MARIA G</b>	1.2 NAME	<b>MARIA D.</b>
STREET ADDRESS	<b>10201 NW 3RD COURT</b>	1.3 STREET ADDRESS	<b>3504 SW 173RD TER</b>
CITY-ST-ZIP	<b>PEMBROKE PINES FL 33026</b>	1.4 CITY-ST-ZIP	<b>MIRAMAR FL 33029</b>
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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.

SIGNATURE:

*Messias Estanislau*

**2/19/98**

**(305) 908-6859**

CR2E034 (10/97)