

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

FILED

Feb 23 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000016219 (2)

1. Corporation Name
INTERCONTINENTAL 2000, INC.



Principal Place of Business

Mailing Address

888 SOUTHEAST THIRD AVENUE
SUITE #400
FORT LAUDERDALE FL 33316

888 SOUTHEAST THIRD AVENUE
SUITE #400
FORT LAUDERDALE FL 33316

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

02/20/1997

4. FEI Number

65-0733393

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

LARRY J. BEHAR, P.A.
888 SOUTHEAST THIRD AVENUE
SUITE #400
FORT LAUDERDALE FL 33316

81 Name

DAVID SADDON

82 Street Address (P.O. Box Number is Not Acceptable)

3000 Island Blvd. Ste. 906

83

84 City

N. Miami Beach

FL

85 Zip Code
33160

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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE

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

DAVID SADDON

(NOTE: Registered Agent signature required when reinstating)

February 3, 1998

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME ~~DAVID SADDON~~

STREET ADDRESS ~~3000 ISLAND BLVD~~

CITY-ST-ZIP ~~AVENTURA, FL, 33160~~

TITLE ☐ DELETE

NAME ~~SECRETARY~~

STREET ADDRESS ~~4000 ISLAND BLVD~~

CITY-ST-ZIP ~~AVENTURA, FL, 33160~~

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME ~~DAVID SADDON~~

1.3 STREET ADDRESS ~~3000 ISLAND BLVD~~

1.4 CITY-ST-ZIP ~~AVENTURA, FL, 33160~~

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME ~~SECRETARY~~

2.3 STREET ADDRESS ~~4000 ISLAND BLVD~~

2.4 CITY-ST-ZIP ~~AVENTURA, FL, 33160~~

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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:

Feb 3 98 (305) 931-2518

CR2E034 (10/97)