

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 16, 2002 8:00 am**  
**Secretary of State**

07-16-2002 90350 007 \*\*\*158.75

**DOCUMENT # P97000020872**

1. - Entity Name

**INTERNATIONAL LAND CONSULTANTS, INC.**

Principal Place of Business

**6365 TAFT ST**

**3007**

**HOLLYWOOD FL 33024**

Mailing Address

**6365 TAFT ST**

**3007**

**HOLLYWOOD FL 33024**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**65-0742111**

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☒

**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**TOSCANO, ROCCO**

**1689 HIATUS RD B #148**

**PEMBROKE PINES FL 33026**

7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

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

*Rocco Toscano President*  
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**7-1-02**

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete  
 NAME **TOSLANO, ROCCO**  
 STREET ADDRESS **1689 HIATUS ROAD #148**  
 CITY-ST-ZIP **PEMBROKE PINES FL 33026**

TITLE **VPS** ☐ Delete  
 NAME **TOSCANO, ROCCO**  
 STREET ADDRESS **1689 HIATUS ROAD #148**  
 CITY-ST-ZIP **PEMBROKE PINES FL 33026**

TITLE **T** ☐ Delete  
 NAME **TOSCANO, ROCCO**  
 STREET ADDRESS **1689 HIATUS ROAD #148**  
 CITY-ST-ZIP **PEMBROKE PINES FL 33026**

TITLE **D** ☐ Delete  
 NAME **TOSCANO, ROCCO**  
 STREET ADDRESS **940 SW 99 AVE**  
 CITY-ST-ZIP **PEMBROKE PINES FL 33025**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

*Rocco Toscano President*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Residing State

CR2E034 (4/02)



Attachment

#P9700002087-02

120494

Dear Sirs

WE MAILED IN OUR <sup>150.00</sup> FEE  
Back in April. WE REQUEST YOU

WAIVE ALL FINES AND LATE FEES.

WE HAVE HAD THIS CORPORATION

SINCE 1997 AND I CAN ASSURE

YOU WE WOULD NEVER LET IT  
BE DISSOLVED OR REVOKED.

THANK YOU

Rocco Toscano