2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P97000020872

1. Entity Name

INTERNATIONAL LAND CONSULTANTS, INC.



FILED Apr 17, 2007 8:00 am Secretary of State 04-17-2007 90050 041 ***150.00

pal Place of Business Mailing Address

Principal Plac	e of Business	Mailing Address						
8177 WEST	GLADES ROAD	8177 WEST GLADES	ROAD					
101	ON EL 00404	101	40.4		#1324 #12 #200 #660 BBUH BBUH BBUM 8200 BBUB #1			
BOCA HAT	ON FL 33434	BOCA RATON FL 33	434					
2. Principal P	lace of Bysiness - No P.Q. Box #	3. Mailing Address	-					
44bc	s Noteberal Hund	4400 N.	Federal Hogy	、				
Suite Ant	#, etc.	Suite, Apt. #, etc.	0	┥	1100BE 080E001	((0 (0 0)		
# 36				1st	MOORE CR2E034	(10/06)		
				4 55111		- 1	N	
City & Stat		City & State	TON, FL.	4. FEI Numbe	^{er} 65-0742111		Applied For	
DUCA I	CATON, P(- 1	BOCA RE	HUN, IL.			!	Not Applicable	
- Zipe	Country	Zip	Country	5 Cortificato	of Status Desired	8.75 A	dditional	
375	ハート ひふひょう	3343(I USA	3. Certificate	F F	ee Requi	ed	
	6. Name and Address of Current	Registered Agent		7. Name and	Address of New Registered A	gent	***	
			Name			3		
TOSCANO, ROCCO L								
13181 NW 19TH ST			Street Address	Street Address (P.O. Box Number is Not Acceptable)				
· DEN	PEMBROKE PINES FL 33028							
FEN	IDHONE FINES FE 33020							
	Se ^{re}							
			City		FL	Zip Co	de	
						<u></u>		
8. The above	named entity submits this statement for	the purpose of changing it	s registered office or regist	tered agent, or bo	th, in the State of Florida. I am fa	miliar wit	n, and accept	
the obligat	ions of registered agent.					1 ~		
<	1/1//				1.13	104	•	
SIGNATURE.		111 - 111 - 110	TE 0		9,7			
	Suitablife ped or printed name of registered agent a	and title if applicable. (NO	TE. Registered Agent signature requir	red when reinstating)	DATE			
F	ILE NOW!!! FEE IS \$150.00	·						
	May 1, 2007 Fee Will Be \$550.00				Election Campaign Financir	g \$ 5	.00 May Be	
	Payable to Florida Department of	State			Trust Fund Contribution.	_ Ad	ded to Fees	
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS	CHANGES TO OFFICERS AND	DIRECTO	RS IN 11	
TITLE	P	☐ Delete	11111			Change	Addition	
NAME	TOSCANO, ROCCO L		NAME					
STREET ADDRESS	13181 NW 19TH ST		STREET ADDRESS					
CHY-ST-ZIP	PEMBROKE PINES FL 33028		CITY - ST - 7IP					
0111-31-21	l		0111-31-78					
TITLE	VPS	☐ Delete	TITLE			Change	Addition	
NAME	TOSCANO, ROCCO		NAME					
STREET ADDRESS	13181 NW 19TH ST		STREET ADDRESS					
CITY-ST-ZIP	PEMBROKE PINES FL 33028		CITY-SI-ZIP				i	
	r		 					
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NAME	TOSCANO, ROCCO	•	NAMC					
STREET ADDRESS	13181 NW 19TH ST		STREET ADDRESS					
CITY+ST-ZIP	PEMBROKE PINES FL 33028		CITY+ST-ZIP					
TITLE	D		TITLE			Change	Addition	
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	TOSCANO, ROCCO	L_: Delete	NAME:					
STREET ADDRESS	TOSCANO, ROCCO 13181 NW 19TH ST	L_1 Deleie	NAME STRULT ADDRESS					
	TOSCANO, ROCCO	L_J Celele	NAME:					
STREET ADDRESS CITY-ST-ZIP	TOSCANO, ROCCO 13181 NW 19TH ST		NAME STRULT ADDRESS			☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP TITLE	TOSCANO, ROCCO 13181 NW 19TH ST	☐ Detele	NAME STRUCT ADDRESS CITY-ST-ZIP TITLE			☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME.	TOSCANO, ROCCO 13181 NW 19TH ST		NAME STRUCT ADDRESS CITY-ST-ZIP TITLE NAME			☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME: STREET ADDRESS	TOSCANO, ROCCO 13181 NW 19TH ST		NAME SIRLU ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS			☐ Change	: Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME.	TOSCANO, ROCCO 13181 NW 19TH ST		NAME STRUCT ADDRESS CITY-ST-ZIP TITLE NAME					
STREET ADDRESS CITY-ST-ZIP TITLE NAME: STREET ADDRESS	TOSCANO, ROCCO 13181 NW 19TH ST		NAME SIRLU ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS			☐ Change		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROCCO L. TOSCANO, PASSELY

4/3/07

931-946-3538