

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P9700075446 1. Entity Name ICOM SOFTWARE, INC.		
Principal Place of Business 224 DATURA STREET SUITE 803 WEST PALM BEACH, FL 33401 US		Mailing Address P. O. BOX 2166 W. PALM BEACH, FL 33402
2. Principal Place of Business Suite, Apt. #, etc. # 603	3. Mailing Address Suite, Apt. #, etc. 224 Datura St. # 603	
City & State West Palm Beach FL		4. FEI Number 23-2725296
Zip 33404	Country USA	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent GOULET, STEVEN 2626 LAKE DRIVE #316 RIVIERA BEACH, FL 33404		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: <u><i>Steven Goulet</i></u> DATE: <u>6/3/03</u> <small>Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when re-issuing)</small>		
FILING FEE IS \$150.00 FILING MAY 15, 2003 FEE WITHIN \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVTs GOULET, STEVEN 2626 LAKE DR #316 RIVIERA BEACH, FL 33404	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCM GOULET, STEVEN 2626 LAKE DR #316 RIVIERA BEACH, FL 33404	<input type="checkbox"/> Delete
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12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.		
SIGNATURE: <u><i>Steven Goulet</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		DATE: <u>6/3/03</u> <small>DATE</small>

CRE-034 (10/02)

581/833-6959

80125329

P971000075416

6/4/03

Dear

FBI Dept of State

I called your office on 6/3/03

regarding my 2003 UBR filing

I had not received my form for 2003

as my address had changed in

April 2002. (The cool part about

this is I get to use your online document

request system and it is awesome. I

built web site & yours is totally

impressive.)

80125329
P97000075446

When I did download my form
(enclosed) I noted that there
was a typo on the Place of Business - Suite #, &
that the mailing ~~box~~ address was