

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

FILED
Jun 02, 2003 8:00 am
Secretary of State

06-02-2003 90201 032 ***150.00

DOCUMENT # P97000092169

1. Entity Name

Icon Project Development, Inc.



2. Principal Place of Business
921 Osceola Dr.

3. Mailing Address
921 Osceola Dr.

Suite, Apt. #, etc.
#6

Suite, Apt. #, etc.
#6

DO NOT WRITE IN THIS SPACE

City & State
Boca Raton, FL

City & State
Boca Raton, FL

4. FEI Number 65-0795306

Applied For
Not Applicable

Zip Country
33432 USA

Zip Country
33432 USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name Claudia K. Nettig

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

921 Osceola Dr. #6

City Boca Raton

FL Zip Code 33432

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

PS
Alexander N. Deiser
921 Osceola Dr. #6
Boca Raton, FL 33432

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

VPT
Claudia K. Nettig
921 Osceola Dr. #6
Boca Raton, FL 33432

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
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NAME
STREET ADDRESS
CITY - ST - ZIP

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Alexander Deiser

Date

Daytime Phone #

CR2E034B (12/02)