

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

FILED
Apr 08, 1999 8:00 am
Secretary of State

04-08-1999 90037 020 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000065170
1. Corporation Name
I. C. U. Enterprises Corp.

Principal Place of Business
17038 Collins Ave.
North Miami Beach, FL 33160

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 7-24-98	Applied For Not Applicable
4. FEI Number 65-0852942	
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	

9. Name and Address of Current Registered Agent

Jo-Ann Stein
17038 Collins Ave.
North Miami Beach, FL 33160

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

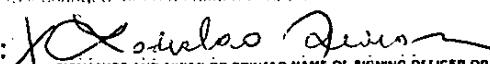
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE _____ (DATE) _____

12. OFFICERS AND DIRECTORS	
TITLE	NAME
STREET ADDRESS	CITY, ST, ZIP
1. Ladislao Revesz - Pres., Treasurer	17038 Collins Ave. N. Miami Beach, FL 33160
TITLE	NAME
STREET ADDRESS	CITY, ST, ZIP
2. Vice-Pres., Secretary	Jo-Ann Stein 17038 Collins Ave. N. Miami Beach, FL 33160
TITLE	NAME
STREET ADDRESS	CITY, ST, ZIP
TITLE	NAME
STREET ADDRESS	CITY, ST, ZIP
TITLE	NAME
STREET ADDRESS	CITY, ST, ZIP
TITLE	NAME
STREET ADDRESS	CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1999	
11 TITLE	12 NAME
13 STREET ADDRESS	14 CITY, ST, ZIP
21 TITLE	22 NAME
23 STREET ADDRESS	24 CITY, ST, ZIP
31 TITLE	32 NAME
33 STREET ADDRESS	34 CITY, ST, ZIP
41 TITLE	42 NAME
43 STREET ADDRESS	44 CITY, ST, ZIP
51 TITLE	52 NAME
53 STREET ADDRESS	54 CITY, ST, ZIP
61 TITLE	62 NAME
63 STREET ADDRESS	64 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)(b), 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 is on Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-23-99 (305) 949-8863