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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000071119

: Corporation Name :

INTERNATIONAL COMMERCE CENTER OF DANIAS INC.

Principal Place	e of Business	Mailing Address										
1900 CORPORATE BLVD NW		1900 CORPORATE BLVD NW										
SUITE 301W		SUITE 301W				DO NOT WRITE IN THIS SPACE						
BOCA RATON	FL 33431	BOCA RATON FL 33431			3	Date Incorporate						
					"	08/11/1998				_	_	
2 Principal P	lace of Business	2a. Mailing Address			4.	, FEI Number			سَو	Appli	ed For	
21	26					,				Not A	Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.			E Cartifanto of S			C-difference of Stod	us Desired			-	ditional	
27				5. Certifcate of Statu			us Desired		Fe	e Requ	ired	
City & State City & State			6. Election			. Election Campaig	ection Campaign Financing			<b>\$5.00</b> May Be		
23 28						Trust Fund Contribution Added to Fees					Fees	
Zip	Country Zip				8.	3. This corporation owes the current year Intangible					٦	
24	25 29 30						nal Property Tax. Byes DNo					
	9. Name and Address of Current	Registered Agent	-			, Name and Addr	ess of New	Registered	Agent			
ND4	CNA CADV M		81	Name								
KRASNA, GARY M 1900 CORPORATE BLVD NW				Street	Address (F	Address (P.O. Box Number is Not Acceptable)						
	TE 301W		<u>_</u>									
	CA RATON FL 33431		83	l								
ВОС	A NATUN PL 33431		84	City					85	Zip Co	de	
				<u> </u>				FI		- 16	-internal	
11. Pursuant	to the provisions of Sections 607.0502 registered agent, or both, in the State of	2 and 607.1508, Florida Statutes, the	abov	e-named	l corporatio	on submits this state loard of directors. !	ement for the hereby acce	e purpose o	or changin pintment a	g its re is regis	gistered	
agent. I a	im familiar with, and accept the obligat	ions of, Section 607.0505, Florida Sta	tutes	·-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•					
SIGNATURE								DATE				
	Signature; typed or printed name of registered agent			it signature	required when	ADDITIONS/CHA	NGES TO O		ND DIRE	CTOR	S IN 12	
TITLE	OFFICERS ANI		ritle		TOIL	)	NGL3 10 0	THOCKS	☐ Cha	nge	Addition	
		<del>-</del>	NAME		Link	la stack	house.			-		
NAME				T ADDRESS	1380	Boylsto	n Stre	et				
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NAME		22.0			And	rew Stac	khous	0 .				
STREET ADDRESS	J			T ADORESS	780	o Boylsi	ton St	rect				
CITY-ST-ZIP	<u> </u>	1	CITY-		Boss	too MA	ORK	79				
TITLE	-	☐ DELETE 3.11			1		·		☐ Cha	nge	Addition	
NAME		3.2	NAME									
STREET ADDRESS				T ADDRESS	3							
CITY-ST-ZIP			CITY-									
TITLE			TITLE		1				Cha	nge	Addition	
NAME		4.2	NAME									
STREET ADDRESS		4.3	STREE	T ADDRESS	3							
CITY-ST-ZIP			CITY-S			_			<u> </u>			
TITLE			TITLE		1				Cha	nge	Addition	
NAME		5.2	NAME									
STREET ADDRESS	I				1							
3 INCL I ADDITION	i	5.3	STREE	T ADDRESS	3							

14. 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 annual report or supplemental finual 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 12 or Block 13 if changed, or or an autochment with an address, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

□ DELETE

☐ Change

Addition

**FILED** 

May 06, 1999 8:00 am Secretary of State

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