2004 FOR PROFIT CORPORATION ANNUAL REPORT

PS 182

DOCUMENT # P9900002980 1. Entity Name INTER-COMM EXPRESS, INC.							O4 SES	1. E.D.	12: 4	,2 			
Principal Place of Business 1691WERST 37 ST STE 35 HIALEAH, FL 33012			Mailing Address 8201 N.W. 66 ST., STE. 4 MIAMI, FL 33166				OL SEP 15 PM 12. 4.2 SECRETARY SEE, FLORIDA TALLAHASSEE						
2. Principal Place of Business 9101 NW 113M STREET Suite, Apt. #, etc.			3. Mailing Address 9101 NW 11374 GRAFF Suite, Apt. #, etc.			09142004 Chg-P CR2E034 (10/03)							
City & State HAVEAH GARDENS, FL			City & State HAWAH GAMENS, FL				4. FEI Numb 65-088					pplied For ot Applicable	
MOIB Country USA		7ip 3301 8	Coun	ptry			of Status Des		L Fe	8.75 Add			
	6. Name	and Address of Current I	Name -	٠	7. Name and		New Re	gistered Ag	ent				
GREGORIO, JAIME						Name CARGORIO, JAIME							
1691 WEST 37 STREET STE 35 HIALEAH, FL 33012						Street Address (P.O. Box Number is Not Acceptable)							
						ALEAH GALDENS				FL Zin Sodie			
8. The above rained 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													
Signature, typed of printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)										DATE			
FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004 9. Election Campaign Finan Trust Fund Contribution.							00 May Be ed to Fees						
10.	1	OFFICERS AND		11.				CHANGES T	O OFFI			S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1691 WES	IO, JAIME ST 37 STREET #35 , FL 33012	□ Deleta		_	9101	ST NW 113 LEAH GA	THE STAGE	Er Fi	4 38018	Change	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete							[□ Change	☐ Addition	
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

Date

1 11

Miami Accounting

4114 NW 4 Terrace, Miami, FL 33126

Phone: (305) 642-3231 (305) 642-3232

(305) 642-3232

September 14, 2004

Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

RE: Inter-Comm Express, Inc.

P99000002980 2004 Annual Report

Dear Division of Corporations:

My client has just been informed by his financial institution that the annual report for his corporation, Inter-Comm Express, Inc., has not been filed. Due to the change of address my client did not receive most of his correspondence.

I have attached the annual report for the 2004 calendar year with the corresponding payment.

I request that the late filing penalty be waived due to his circumstances.

Sincerely

Ralph Mederos, PA