

# 2000 UNIFORM BUSINESS REPORT (UBR)

3/2.

**FILED**

**May 09, 2000 8:00 am**  
**Secretary of State**

03-25-2000 90013 033 \*\*\*150.00

**DOCUMENT # P99000027578**

1. Entity Name

ICS WORLDNET, INC.

Principal Place of Business

Mailing Address

11371 SW 114TH ST  
MIAMI FL 33176

11371 SW 114TH ST  
MIAMI FL 33173-3276

2. Principal Place of Business

3. Mailing Address

9380 SW 72nd Street

9380 SW 72nd Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

B-220 B

B-220 B

City & State

City & State

MIAMI, FL.

MIAMI, FL.

Zip 33173

Country USA

Zip 33173

Country USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

05-0912713

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORTADA, RAMON X  
11371 SW 114TH ST  
MIAMI FL 33176

Name RAMON X. CORTADA

Street Address (P.O. Box Number is acceptable)

9380 SW 72nd Street

# B-220 B

City MIAMI

FL

Zip 33173

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME ALVAREZ, ALEJANDRO F  
STREET ADDRESS 11371 SW 114TH ST  
CITY-ST-ZIP MIAMI FL 33176 ☐ Delete

TITLE PD  
NAME ALVAREZ, ALEJANDRO F  
STREET ADDRESS 9380 SW 72nd Street, # B-220 B  
CITY-ST-ZIP MIAMI, FL. 33173 ☒ Change ☐ Addition

TITLE STD  
NAME TARELLI, MARIA C  
STREET ADDRESS 11371 SW 114TH ST  
CITY-ST-ZIP MIAMI FL 33176 ☐ Delete

TITLE STD  
NAME TARELLI, MARIA C.  
STREET ADDRESS 9380 SW 72nd Street, # B-220 B  
CITY-ST-ZIP MIAMI, FL. 33173 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*[Signature]* **STATE SECRETARY REQUIRED** **FABIAN ALVAREZ PD** **03/01/2000** **(305) 596-1460**

SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #