

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 13 1998 8:00am
Secretary of State

DOCUMENT # S39925 (0)

1. Corporation Name

INTERCONTINENTAL WARRANTY SERVICES, INC.



Principal Place of Business

Mailing Address

1191 E. NEWPORT CTR. DR.
STE. 102
DEERFIELD BEACH FL 33442
US

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STE 102
DEERFIELD BEACH FL 33442
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/15/1991

4. FEI Number

65-0276779

Applied For

Not Applicable

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

SCHORR, STEPHEN A.
2101 N. ANDREWS AVENUE
SUITE 400
FT. LAUDERDALE FL 33311

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE PD
NAME ROGERS, JEROME H.
STREET ADDRESS 7388 VALENCIA DR.
CITY-ST-ZIP BOCA RATON FL

TITLE VD
NAME TENBERG, CLYDE W JR.
STREET ADDRESS 2333 NE 30TH CT.
CITY-ST-ZIP LIGHTHOUSE PT. FL

TITLE ST
NAME MCCORD, JACQUELINE L
STREET ADDRESS 3991 NW 108 DR.
CITY-ST-ZIP CORAL SPRINGS FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☒ Addition

1.1 TITLE ~~Secretary~~ Secretary
1.2 NAME FREDRICK W. BROWN
1.3 STREET ADDRESS 2121 North Ocean Blvd
1.4 CITY-ST-ZIP Boca Raton, FL

2.1 TITLE CHIEF FINANCIAL OFFICER
2.2 NAME William G. Corrico
2.3 STREET ADDRESS 812 Boring Avenue #110
2.4 CITY-ST-ZIP Pompano Beach FL 33062

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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 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 executor 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 on an attachment with an address.

SIGNATURE

Signature of Stephen A. Schorr

CR2E034 (10/97)