PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S39925

INTERCONTINENTAL WARRANTY SERVICES, INC.

Principal Place of Business 1191 E. NEWPORT CTR. DR. STE. 102 DEERFIELD BEACH FL 33442

2. Principal Place of Business

Mailing Address

2a. Mailing Address

1191 E NEWPORT CTR. DR. STE. 102

DEERFIELD BEACH FL 33442

FILED

Secretary of State

03-04-1999 90029 001 ***150.00

Mar 04, 1999 8:00 am

DO NOT WRITE IN THIS SPACE

Applied For

3. Date Incorporated or Qualifed

03/15/1991

4. FEI Number

26 600 W. HILLSBURG BLUD 65-0276779 Not Applicable 600 W. HILLSBOOD BLVD. Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certifcate of Status Desired П # 250 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be DEERLIBUS BEREN ET DEEREIEN BEON Trust Fund Contribution Added to Fees Country Country 8. This corporation owes the current year Intangible **N**o 42U 25 USA Personal Property Tax. 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SCHORR, STEPHEN A. 82 Street Address (P.O. Box Number is Not Acceptable) 2101 N. ANDREWS AVENUE SUITE 400 83 FT. LAUDERDALE FL 33311 84 City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12, 13. DELETE TOTTEN - CEO ☐ Change Addition _ 1175LE TITLE PATRICK P. TOTIEN 831 NW 84TH DR CORAL SPRINGS EL BROWN, FREDRICK N 1.2 NAME NAME 2121 N OCEAN BLVD 1.3 STREET ADDRESS DRIVE STREET ADDRESS **BOCA RATON FL** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Change ☐ Addition 21 TITLE TITLE CARRICO, WILLIAM G 2.2 NAME WILLIAM G. CARRICO NAME 2731 NE 1474 St. #820 812 BRINY AVE STE 11C 2.3 STREET ADDRESS STREET ADDRESS COOKE IT-UDISEP-OURGING POMPANO BEACH-FL 33062 2. 4 CHTY-ST-ZIP CITY-ST-ZIP Addition DELETE ☐ Change 3.1 TITLE TITLE PREZ10ENT JERONE H. RUCENI NAME 37 NAME 7388 VALENCIA DRIVE 3.3 STREET ADDRESS STREET ADDRESS BOCA TRATON, FL 33433 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE VICE PRETIDENT - SOLVET Change Addition 4.1 TITLE TITLE SOURD TERRES 4. 2 NAME NAME 15470 SW 15570 AVE 4.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33187 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition □ DELETE Change 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Addition □ DELETE ☐ Change TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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)(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 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

GRANCE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/9/99 (9/4) 427-3/1/ Date Daytime Phone #

CR2E034 (11/98)