

DOCUMENT # S40007

1. Entity Name--

INTERNATIONAL COLLECTION ALLIANCE, INC.

FILED
Aug 28, 2000 8:00 am
Secretary of State

08-28-2000 90060 015 ***150.00

Principal Place of Business

7280 WEST PALMETTO PARK ROAD
110
BOCA RATON FL 33433
US

Mailing Address

C/O ~~Robert G. Cooper~~
225 N.W. 52ND ST
BOCA RATON FL 33433

C/O Adams, Cooper
↓

2. Principal Place of Business

3. Mailing Address

P.O. Box 3600

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Boca Raton Florida

Zip

Country

Zip

33431

Orlando Beach
U.S.A.

4. FEI Number

65-0253150

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COOPER, ROBERT G.
7280 WEST PALMETTO PARK ROAD SUITE 110
SUITE 110
BOCA RATON FL 33433

Name

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

City

FL

Zip Code

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 NAME STREET ADDRESS CITY-ST-ZIP	D COOPER, LORI B 7280 WEST PALMETTO ROAD, STE. 110 BOCA RATON FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COOPER, ROBERT G. 7280 WEST PALMETTO PARK ROAD, STE. 110 BOCA RATON FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert G. Cooper
President

July 6, 2000

(561) 368-9300

Date

Daytime Phone #

CR2E034 15/m

Attachment UOCH: S40607
D0082036



August 23, 2000

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Florida 32302-1500

RE: International Collection Alliance, Inc.
#S4007 65-0253150

To Whom It May Concern:

Pursuant to my previous discussions, please be advised that I did not receive the enclosed 2000 Uniform Business Report until a few weeks ago and therefore respectfully request that the late fee be completely waived.

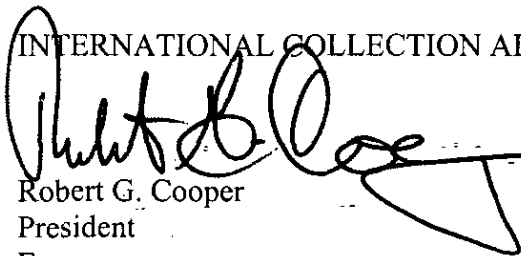
Enclosed please find a check payable to the Department of State in the amount of \$150.00.

Thank you for your understanding and cooperation in the foregoing.

I can be reached at (561) 368-9300 for any further questions.

Sincerely yours,

INTERNATIONAL COLLECTION ALLIANCE, INC.



Robert G. Cooper
President
Enc.