2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# V44779

Entity Name: I.C.S.A. CORP.

City-St-Zip:

FILED Feb 07, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4080 WOODRIDGE RD MIAMI, FL 33133 **Current Mailing Address: New Mailing Address:** 4080 WOODRIDGE RD MIAMI, FL 33133 FEI Number: 65-0347451 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CALAFELL, LAURA 4080 WOODRIDGE ROAD MIAMI, FL 33133 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: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title:

(X) Change () Addition CALAFELL, JAVIER Name: CALAFELL, JAVIER Name: 4080 WOODRIDGE ROAD 4080 WOODRIDGE ROAD Address: Address: City-St-Zip: MIAML FL City-St-Zip: MIAMI, FL 33133 Title: Title: V/D (X) Change () Addition () Delete Name: CALAFELL, ESTEBAN Name: CALAFELL, ESTEBAN Address:

4080 WOODRIDGE ROAD 4080 WOODRIDGE ROAD Address: MIAMI, FL 33133 MIAMI, FL City-St-Zip:

Title: Title: () Delete P/D (X) Change () Addition CALAFELL, LAURA B Name: CALAFELL, LAURA Name:

4080 WOODRIDGE RD 4080 WOODRIDGE RD Address: Address: City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL 33133

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAURA CALAFELL P/D 02/07/2002