CR2E034:(11/98)

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90069 014 ***150.00

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DOC	JMENT	Γ# \	/69 :	358

1. Corporation Name

INTERNATIONAL COMMUNICATIONS PRODUCTS, INC.

Principal Place of Business Mailing Address		ailing Address			I (SEC) Bildia 2:148 (2:00 (2:00) allat 2:00 milit ateri alam areas areas areas					
4325 WOODLAND PARK DR SUITE 101 WEST MELBOURNE FL 32904		242 RIVER WALK DR MELBOURNE BEACH FL 32951		DO NOT WRITE IN THIS SPACE						
US					3. Date Incorporated or Qualifed					
}						10/02/1992				
2.	Principal Place of Business	2a.	Mailing Address			4. FEI Number		Applied For		
21]	26				59-3151424		Not Applicable		
	Suite, Apt. #, etc.	<u></u>	Suite, Apt. #, etc.			5. Certificate of Status Desired		75 Additional		
22	City & State	28	City & State	==		Election Campaign Financing Trust Fund Contribution		.00 May Be ded to Fees		
24	Zip Country	29	Zip Cour	itry		This corporation owes the current year Int Personal Property Tax.	angible Yes			
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Age						Agent				
	CALDWELL, HENRY S.			81	Name					
242 RIVER WALK DR MELBOURNE BEACH FL 32951			82	Street Addres	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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ DELETE Change ☐ Addition 1.1 TITLE TITLE CALDWELL, HENRY S. 1.2 NAME NAME 242 RIVER WALK DR 1.3 STREET ADDRESS STREET ADDRESS MELBOURNE BEACH FL 32951 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 2.1 TITLE TITLE BURR, CHARLES 22 NAME NAME 3806 HIELD RD NW 2.3 STREET ADDRESS STREET ADDRESS PALM BAY FL 32907 2.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition T DELETE TITLE 3.1 TITLE CALDWELL, PATRICIA 3.2 NAME NAME 242 RIVER WALK DR 3.3 STREET ADDRESS STREET ADORESS 32951 MELBOURNE BCH FL 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition □ DELETE 4.1 TITLE TITLE 4, 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS -CITY-ST-ZIP 6.4 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:



407.722.2700