


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 30, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # V69358</b> 1. Entity Name INTERNATIONAL COMMUNICATIONS PRODUCTS, INC.	
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Principal Place of Business 4325 WOODLAND PARK DR SUITE 101 WEST MELBOURNE, FL 32904 US	Mailing Address 4325 WOODLAND PARK DR SUITE 101 WEST MELBOURNE, FL 32904 US
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01212004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3151424	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

CALDWELL, HENRY S.  
242 RIVER WALK DR  
MELBOURNE BEACH, FL 32951

**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent

SIGNATURE \_\_\_\_\_

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

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

U00000023493  
02/02/04-80028-007 150.00

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY- ST- ZIP	DS CALDWELL, HENRY S. 242 RIVER WALK DR MELBOURNE BEACH, FL 32951
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	D BURR, CHARLES 3806 HIELD RD NW PALM BAY, FL 32907
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	VP CALDWELL, PATRICIA 242 RIVER WALK DR MELBOURNE BCH, FL 32951
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	
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**DO NOT WRITE  
IN THIS SPACE**

12. 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 10 or Block 11 if changed or on an attachment with an address with all other like empowered

SIGNATURE: \_\_\_\_\_

*Henry S. Caldwell* HENRY S. CALDWELL 1/22/04 3217222700  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #