

01 UNIFORM BUSINESS REPORT (UBR)

Amended

FILED

01 AUG 29 PM 3:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # 268830

Entity Name
IFCO ICS - Florida, Inc.

Principal Place of Business Mailing Address

2. Principal Place of Business
6191 Jones Avenue
Suite, Apt. #, etc.

3. Mailing Address
P. O. Box 278
Suite, Apt. #, etc.

City & State
Zellwood, FL

City & State
Zellwood, FL

Zip
32798

Country
USA

4. FEI Number
591008750

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

J. M. Murphy
6191 Jones Avenue
Zellwood, FL 32798

7. Name and Address of New Registered Agent

Name
Gerald P. Butler, Jr.

Street Address (P.O. Box Number is Not Acceptable)
6191 Jones Avenue

City
Zellwood

State
FL

Zip Code
32798

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 *Gerald P. Butler, Jr.* (NOTE: Registered Agent signature required when reinstating)

DATE **6-02-01**

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 \$150.00
After MAY 1, 2001 Fee will be \$550.00
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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Elliot S. Pearlman 6191 Jones Avenue Zellwood, FL 32798	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Gerald P. Butler, Jr. 6191 Jones Avenue Zellwood, FL 32798	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Barry Slavin 6191 Jones Avenue Zellwood, FL 32798	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Gayle Hansen-Dalicandro 6191 Jones Avenue Zellwood, FL 32798	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addit
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Calvin Lee 6191 Jones Avenue Zellwood, FL 32798	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addit
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Elliot S. Pearlman 6191 Jones Avenue Zellwood, FL 32798	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addit
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addit
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addit

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Gerald P. Butler, Jr.* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE: **6-02-01** DATE

DAYTIME PHONE: **907 889 5500** DAYTIME PHONE #