

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000072902

FILED
Jan 10, 2005
Secretary of State

Entity Name: INTERNET CONCEPTS UNLIMITED INC.

Current Principal Place of Business:

12697 WINDY WILLOWS DR. N
JACKSONVILLE, FL 32225

New Principal Place of Business:

14723 STARRATT CREEK DR
JACKSONVILLE, FL 32226

Current Mailing Address:

12697 WINDY WILLOWS DR. N
JACKSONVILLE, FL 32225

New Mailing Address:

14723 STARRATT CREEK DR
JACKSONVILLE, FL 32226

FEI Number: 20-1114977

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURNETT, STEVEN
12697 WINDY WILLOWS DR. N
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

BURNETT, STEVEN
14723 STARRATT CREEK DR
JACKSONVILLE, FL 32226 US

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: STEVEN BURNETT

01/10/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BURNETT, STEVEN
Address: 12697 WINDY WILLOWS DR. N
City-St-Zip: JACKSONVILLE, FL 32225

Title: T () Delete
Name: HOWE, KATHRYN
Address: 12697 WINDY WILLOWS DR. N
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BURNETT, STEVEN
Address: 14723 STARRATT CREEK DR
City-St-Zip: JACKSONVILLE, FL 32226

Title: T (X) Change () Addition
Name: BURNETT, KATHRYN
Address: 14723 STARRATT CREEK DR
City-St-Zip: JACKSONVILLE, FL 32226

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: STEVEN BURNETT

P

01/10/2005

Electronic Signature of Signing Officer or Director

Date