

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 10, 2002 8:00 am
Secretary of State

02-10-2002 90051 005 ***150.00

DOCUMENT # P08497

1. Entity Name
INCH OF GOLD, INC.

Principal Place of Business
**3965 INVESTMENT LANE A-9
 RIVIERA BEACH FL 33404**

Mailing Address
**3965 INVESTMENT LANE A-9
 RIVIERA BEACH FL 33404**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3915 Investment Lane
 Suite, Apt. #, etc.

3. Mailing Address
3915 Investment Lane
 Suite, Apt. #, etc.

City & State
Riviera Beach FL
 Zip **33404** Country **USA**

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Riviera Beach FL
 Zip **33404** Country **USA**

4. FEI Number **88-0184002**
 Applied For Not Applicable

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

6. Name and Address of Current Registered Agent

**KRETCHMAR, WILLIAM J.
 2696 NW 64TH BLVD
 BOCA RATON FL 33496**

7. Name and Address of New Registered Agent

Name ~~Kretschmar, William J~~
 Street Address (P.O. Box Number is Not Acceptable)
3012 NE 21st Street
 City **Fort Lauderdale FL** Zip Code **33305**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2002 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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KRETCHMAR, WILLIAM J. 3012 NE 21ST ST FORT LAUDERDALE FL 33305 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST KRETCHMAR, WILLIAM J 3012 NE 21ST ST FORT LAUDERDALE FL 33305 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KRETCHMAR, WILLIAM J 3012 NE 21ST ST FT. LAUDERDALE FL 33310 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Signature Required **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR** **1/22/02** **Date** **Daytime Phone #**

CR2E034 (9/01)