

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000001136

1. Entity Name

INNOVATIVE MIM TECHNOLOGIES, INC.

FILED
Mar 23, 2000 8:00 am
Secretary of State

03-23-2000 90024 013 ***150.00

Principal Place of Business

Mailing Address

PO BOX 33050
LAKELAND FL 33811

PO BOX 33050
LAKELAND FL 33807-3050

2. Principal Place of Business

5300 Allen K. Breed Hwy.

3. Mailing Address

5300 Allen K. Breed Hwy

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Lakeland, FL

City & State

Lakeland, FL

Zip

33811

Country

USA

Zip

33811

Country

USA

4. FEI Number

59-3440945

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BOYD, STUART D ESQ
5300 OLD TAMPA HWY
LAKELAND FL 33811

Name

Street Address (P.O. Box Number is Not Acceptable)
5300 Allen K. Breed Hwy.

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2000 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 ☐ Delete
NAME PD
STREET ADDRESS PHILLIPS, KOLA
CITY-ST-ZIP 5300 OLD TAMPA HIGHWAY
LAKELAND FL 33811

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME S
STREET ADDRESS BOYD, STUART D
CITY-ST-ZIP 5300 OLD TAMPA HIGHWAY
LAKELAND FL 33811

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME T
STREET ADDRESS SALTARELLI, ROBERT
CITY-ST-ZIP 5300 OLD TAMPA HWY
LAKELAND FL 33811

TITLE ☒ Change ☐ Addition
NAME Treasurer
STREET ADDRESS William G. King
CITY-ST-ZIP 5300 Allen K. Breed Hwy.
Lakeland, FL 33811

TITLE ☐ Delete
NAME D
STREET ADDRESS BREED, JOHNNIE C
CITY-ST-ZIP 5300 OLD TAMPA HIGHWAY
LAKELAND FL 33811

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
STREET ADDRESS SPERANZELLA, CHARELS J
CITY-ST-ZIP 5300 OLD TAMPA HIGHWAY
LAKELAND FL 33811

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME AS
STREET ADDRESS GUPTILL, LIZANNE
CITY-ST-ZIP 5300 OLD TAMPA HWY
LAKELAND FL 33811

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 live empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lizanne Guptill, Asst. Secretary 3/21/00 863-668-6388

Date

Daytime Phone #

CR2E034 (9/99)