

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K51953

FILED  
Mar 22, 2007  
Secretary of State

Entity Name: INNOVATIVE CONCEPT GROUP, INC.

## Current Principal Place of Business:

INNOVATIVE CONCEPT GRP  
8508 BENJAMIN ROAD, SUITE C  
TAMPA, FL 33634 US

## Current Mailing Address:

INNOVATIVE CONCEPT GRP  
P O BOX 30719  
TAMPA, FL 336303719 US

## New Principal Place of Business:

INNOVATIVE CONCEPT GROUP, INC.  
8508 BENJAMIN ROAD, SUITE C  
TAMPA, FL 33634 US

## New Mailing Address:

INNOVATIVE CONCEPT GROUP, INC.  
P O BOX 30719  
TAMPA, FL 336303719 US

FEI Number: 59-2920918

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PLESS, JAMES A  
8508 BENJAMIN ROAD SUITE C  
TAMPA, FL 33634 US

## Name and Address of New Registered Agent:

TAYLOR, WILLIAM S JR.  
8508 BENJAMIN ROAD SUITE C  
TAMPA, FL 33634 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: WILLIAM S. TAYLOR, JR

03/22/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: TAYLOR, WILLIAM S JR.  
Address: P O BOX 30719  
City-St-Zip: TAMPA, FL 33630

Title: CEO ( ) Delete  
Name: PLESS, JAMES A  
Address: P BOX 30719  
City-St-Zip: TAMPA, FL 33630

Title: CFO ( ) Delete  
Name: PROVANCE, DARLENE  
Address: P.O. BOX 30719  
City-St-Zip: TAMPA, FL 33630

Title: S (X) Delete  
Name: GROSS, DEBORAH  
Address: P.O. BOX 30719  
City-St-Zip: TAMPA, FL 33630

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: TAYLOR, WILLIAM S JR.  
Address: P O BOX 30719  
City-St-Zip: TAMPA, FL 336303719

Title: T (X) Change ( ) Addition  
Name: PROVANCE, DARLENE  
Address: P.O. BOX 30719  
City-St-Zip: TAMPA, FL 336303719

Title: S (X) Change ( ) Addition  
Name: GROSS, DEBORAH  
Address: P.O. BOX 30719  
City-St-Zip: TAMPA, FL 336303719

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: DARLENE PROVANCE

T

03/22/2007

Electronic Signature of Signing Officer or Director

Date