

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000055068

1. Entity Name

INNOVATIVE GOLD CONCEPTS, INC.

Principal Place of Business

2518 WEST OAKLAND PARK BOULEVARD
OAKLAND PARK FL 33311

Mailing Address

2518 WEST OAKLAND PARK BOULEVARD
OAKLAND PARK FL 33311

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name: Debbie Radbell

Street Address (P.O. Box Number is Not Acceptable)
2518 W. Oakland Park Blvd.

City: Oakland Park

FL

Zip Code
33311

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

Debbie Radbell

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

(NOTE: Registered Agent signature required when reinstating)

DATE
1/10/01

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 ☐ **\$5.00 May Be Added to Fees.**
Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

TITLE: PSTD ☐ Delete
NAME: RADBELL, DEBORAH
STREET ADDRESS: 2518 WEST OAKLAND PARK BOULEVARD
CITY-ST-ZIP: OAKLAND PARK FL 33311

TITLE: PSTD ☐ Delete
NAME: DIMONE, DERRICK
STREET ADDRESS: 2518 WEST OAKLAND PARK BOULEVARD
CITY-ST-ZIP: OAKLAND PARK FL 33311

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

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NAME: ☐ Delete
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TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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:

Debbie Radbell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE
1/10/01

DAYTIME PHONE #
(954) 733-2600

FILED

01-FEB-14-PM-3-17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
801366

DO NOT WRITE IN THIS SPACE

01-24-2001 90054 018-15000

4. FEI Number

65-1014203

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

CR2E034 (10/00)