

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000103737

1. Entity Name
INNOVATIVE CREDIT SOLUTIONS, INC.



FILED

03 SEP 19 AM 9:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
8695 COLLEGE PKY
STE 301
FORT MYES FL 33919

Mailing Address
8695 COLLEGE PKY
STE 301
FORT MYES FL 33919

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1052287

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

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

Name

SPIEGEL & UTRERA, P.A.

Street/Address (P.O. Box Number is Not Acceptable)

343 ALMERIA AVE.

City

CORAL GABLES

FL

Zip Code

33134

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when registering)

DATE

4-2-03

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election/Campaign Financing
Trust Fund Contribution

\$55.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PSTD	☐ Delete
NAME	HECKLER, ERICH M	
STREET ADDRESS	8695 COLLEGE PKWY STE 301	
CITY-ST-ZIP	FORT MYES FL 33919	
TITLE	VPD	☒ Delete
NAME	HECKLER, RITA	
STREET ADDRESS	8695 COLLEGE PKWY STE 301	
CITY-ST-ZIP	FORT MYERS FL 33919	
TITLE	VPD	☒ Delete
NAME	HECKLER, MONIQUE	
STREET ADDRESS	8695 COLLEGE PKWY STE 301	
CITY-ST-ZIP	FORT MYERS FL 33919	
TITLE	TD	☒ Delete
NAME	HECKLER, ANNA	
STREET ADDRESS	8695 COLLEGE PKWY STE 301	
CITY-ST-ZIP	FORT MYERS FL 33919	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	PSTD	☒ Change ☐ Addition
NAME	E. HECKLER	
STREET ADDRESS	PO BOX 60183	
CITY-ST-ZIP	FORT MYERS, FL 33916-6183	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Business Month

4-2-03

UPDATED LETTER

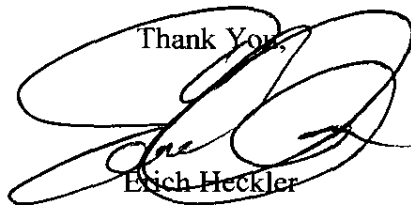
Wednesday, September 17, 2003

Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1500
RE: UBR Filing
Document # P00000103737

To Whom It May Concern:

I am submitting a copy of the report previously filed with this office on 4-2-03. Per a conversation with one of the representatives, I am including a new check for the filing fee. Please contact me directly with any additional information you may need.

Erich Heckler 239-229-9254

Thank You,

Erich Heckler