

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 91034 027 ***150.00

DOCUMENT # P02000066329



1. Entity Name
INNOVATIVE MANAGEMENT ENTERPRISES, INC.

Principal Place of Business
 1948 WINDING OAKS DR
 ORLANDO, FL 32825

Mailing Address
 1948 WINDING OAKS DR
 ORLANDO, FL 32825

44037524



2. Principal Place of Business
1948 Winding Oaks dr
 Suite, Apt. #, etc.

3. Mailing Address
1948 Winding Oak dr
 Suite, Apt. #, etc.

04162004 Chg-P CR2E034 (10/03)

City & State
Orlando FL
 Zip
32825
 Country
USA

City & State
Orlando FL
 Zip
32825
 Country
USA

4. FEI Number
APPLIED FOR 010728895
 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
GREEN, RICHARD A
 1948 WINDING OAKS DR
 ORLANDO, FL 32825

7. Name and Address of New Registered Agent
 Name *Richard Green*
 Street Address (P.O. Box Number is Not Acceptable)
1948 Winding Oak dr
 City *Orlando* State **FL** Zip Code *32825*

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 *Richard Green* DATE *4-22-04*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	GREEN, RICHARD A	1948 WINDING OAKS DR	ORLANDO, FL 32825	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: *Richard Green* DATE *4-22-04* DAYTIME PHONE # *3212390271*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



Attachment
44037524

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

April 16, 2004

INNOVATIVE MANAGEMENT ENTERPRISES, INC.
1948 WINDING OAKS DR
ORLANDO, FL 32825

SUBJECT: INNOVATIVE MANAGEMENT ENTERPRISES, INC.
Ref. Number: P02000066329

We have received your document for INNOVATIVE MANAGEMENT ENTERPRISES, INC. and check(s) totaling \$150.00. However, your check(s) and document are being returned for the following:

Although you attempted to file your annual report form online, you did not successfully complete the process. Therefore, we are returning the enclosed check along with an annual report form for you to complete. Please return the completed form and check to this office for processing.

Only applications approved by the Department of State are acceptable. Please complete the enclosed approved application and return it to our office.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Justin M Shivers
Document Specialist

Letter Number: 804A00025143



Attachment
Division of Corporations

Annual Report *44037524*

Page 1

Document Number
P02000066329
Business-Entity Name

INNOVATIVE MANAGEMENT ENTERPRISES, INC.

FEI Number *01-0728895*
FEI Number Status Applied For Not Applicable Current
Certificate of Status Desired Yes No

Principal Place of Business

Address **1948 WINDING OAKS DR**
Suite, Apt. #, etc. _____
City, State **ORLANDO**, **FL**
Zip Code & Country **32825**

Mailing Address

Address **1948 WINDING OAKS DR**
Suite, Apt. #, etc. _____
City, State **ORLANDO**, **FL**
Zip Code & Country **32825**

Name And Address of Registered Agent

Name (Last, First, Middle, Title) **GREEN**, **RICHARD**, **A**
-or- RA Business Name _____
Address **1948 WINDING OAKS DR**
Suite, Apt. #, etc. _____
City, State **ORLANDO**, **FL**
Zip Code & Country **32825**

If Registered Agent (RA) is changed, the new RA must type their name in the 'Registered Agent Signature' block below. RA signature MUST be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Richard Green
Registered Agent Signature