Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90074 015 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000045198

1. Corporation Name

INNOVATIVE ORGANIZATIONAL CONCEPTS INC.

					<u> </u>		1818 I ISH 1881
Principal Place	e of Business	Mailing Address					
1109 PINELLAS BAYWAY #301 P.O. BOX 294 #301 ST PETERSBURG FL 33731							
TIERRA VERDE FL 33715 US AFTER \$\frac{\mathref{3}}{18} \left[99]					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed 05/21/1996		
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	Ap	plied For
21 530	LEGENDS HILL LAN	1 26 5301 LEGEN	O-S H	ich LA	wE 59-3381407	- No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	
22 BR 00	KS VICE. FL	27 BROOKSVILLE	E F	<u> </u>	3. October of College Beering	Fee Re	quired
City & State City & State					6. Election Campaign Financing	\$5.00	- 1
23 3460	39	28 34609			Trust Fund Contribution	Added t	o Fees
Zip	Country	Zip	Country		8. This corporation owes the current year li		
24	25	29 30	<u>) </u>		Personal Property Tax.	∐ Yes	□No
	9. Name and Address of Current	Registered Agent	941		10. Name and Address of New Registered	1 Agent	
DDC	EDEN WANDA I		81	Name			
Breeden, Wanda J 1109 Pinellas Bay Way				Street Addre	ess (P.O. Box Number is Not Acceptable)		
#301							±
TIERRA VERDE FL 33715							
HEN	NA VENDE LE 337 13		84	City		85 Zip (Code
			{		<u></u>	- ;	
office or n	enistered agent, or both, in the State o	of Florida. Such change was auth	ionized by i	the corporation	pration submits this statement for the purpose on's board of directors. I hereby accept the app	ointment as re	gistered
agent. I a	m familiar with, and accept the obligati	ions of, Section 607.0505, Florida	a Statutes.				
SIGNATURE		AIOTE D	nistand Sasa	t signature required	(when reinstating) DATE		
12.	Signature, typed or printed name of registered agent OFFICERS ANI		13.	. algitature requisos	ADDITIONS/CHANGES TO OFFICERS	ND DIRECTO	RS IN 12
TITLE	P	5/19/99 DELETE	1.1 ππ.Ε			Change	☐ Addition
NAME	BREENEN, WANDA J.	CHANGE ADARES					ļ
STREET ADDRESS	1109 PINELLAS BAYWAY #301	5304 LEGENASH		ADDRESS E			
	TIERRA VERDE FL	BROOKSWILLE FL	1.4 CITY-ST				
CITY-ST-ZIP	ST	BROOKS VILLE FL	2.1 TITLE	- <u>-</u> -Zir		☐ Change	Addition .
NAME	WOOD, WILLIAM T	SAME CHANG					
STREET ADDRESS	-1109 PINELLAS BAY WAY #30		2.3 STREET	ADDRESS	A CALLED IN THE COLUMN TO THE COLUMN THE COL	_	
i	TIERRA VERDE FL	•	2. 4 CITY-S		, , ,	~ •	
CITY-ST-ZIP TITLE	THE TOTAL PROPERTY OF THE PROP	☐ DELETE	3.1 TITLE			☐ Change	☐ Addition
NAME			3.2 NAME				
STREET ADDRESS	,	*	3.3 STREET	ADDRESS			
			3.4. CITY- S				
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE) 4 ,31		Change	Addition
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST				
TITLE	,	DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME		•		
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP'," -	12 13 Car. 13 25 41		5.4 CITY-ST	Γ- ZIP			
OI 1 - O1 - 4IF / -	- - · · · · · · · · · · · · · · · · · ·	☐ DELETE	6.1 TITLE			☐ Change	Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP

图 \$1990 and