

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000081973

1. Entity Name

NEW BUSINESS CONCEPTS, INC.

**FILED**  
**Apr 24, 2000 8:00 am**  
**Secretary of State**

04-24-2000 90052 025 \*\*\*150.00

Principal Place of Business

Mailing Address

C/O JOHN H. HULL  
1925 NE 45TH ST. SUITE 235  
FT LAUDERDALE FL 33308

C/O JOHN H. HULL  
1925 NE 45TH ST. SUITE 235  
FT LAUDERDALE FL 33308-5130

2. Principal Place of Business

3. Mailing Address

5714 Coco Palm Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

TAMARAC, FLORIDA

Zip

Country

Zip

Country

33319

USA

4. FEI Number

65-0864846

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

HULL, JOHN H  
1925 NE 45TH ST, SUITE 235  
FT LAUDERDALE FL 33308

Name

JOHN H. HULL

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

5714 Coco Palm Dr.

City

TAMARAC

FL

Zip Code

33319

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Delete  
NAME D  
STREET ADDRESS HULL, JOHN H  
CITY-ST-ZIP 1925 NE 45 ST, SUITE 235  
FT LAUDERDALE FL 33308

TITLE ☐ Change ☒ Addition  
NAME DIRECTOR, CEO, P  
STREET ADDRESS GERALD WARDEN/GERALD WARDEN  
CITY-ST-ZIP 5714 COCO PALM DR  
TAMARAC, FL 33319

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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: ☒ GERALD WARDEN  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/2000

Date

Daytime Phone #

JOHN H. HULL  
JOHN H. HULL

4/18/2000

CR2E034 (9/99)