2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT

P99000091452

1. Entity Name

INTELLIGENT BUSINESS SOLUTIONS GROUP, INC.

GKN Count



Principal Place of Business 8787 SOUTHSIDE BOULEVARD JACKSONVILLE FL 32256

2. Principal Place of Business

Suite, Apt. #, etc.

10604 Round wood

Mailing Address

3. Mailing Address

Suite, Apt. #, etc.

8787 SOUTHSIDE BOULEVARD

10404 Roundwood Glev Court

SUITE 3416

JACKSONVILLE FL 32256

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FILED

04-29-2003 90075 025 ***150.00

Apr 29, 2003 8:00 am § Secretary of State

CHECK HERE IF MAKING CHANGES

City & Star		Å	City & State	FL		4.	FEI Number 58-2498846		<u> </u>	oplied For ot Applicable	
Zip 3 225	S	Country U.S. A	Zip るみみごく		Country U.S.A.	5.	Certificate of Status Desired		\$8.75 Add	ditional	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent											
JUNG, MATTHEW					Street Address (P.O. Box Number is Not Acceptable)						
8787 SOUTHSIDE BLVD#3416				10604 Round wood Gen Court							
JACKSONVILLE FL 32256					, , , , , , , , , , , , , , , , , , , ,	•			_		
					City	λX		FL	Zip Cod	اً حُر	
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 Matther Ministry Agent and title if applicable (NOTE: Registered Agent signature required when rejectation)											
	Signature, typed	or printed name or registered agent and	d title if applicable.	(NOTE: Re	egistered Agent signa	ure required when re	ninstating)	DATE *			
Afte	May 1, 200	FEE IS \$150.00 Fee will be \$550.00 Florida Department of \$	State				Election Campaign Fina Trust Fund Contribution			0 May Be I to Fees	
10.		OFFICERS AND D	IRECTORS		11.	AD	I DITIONS/CHANGES TO OFFIC	CERS AND	DIRECTORS	3 IN 11	
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NAME	JUNG, MA	TTHEW C			NAME		uatthew		_ `	_	
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12. Thereby 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.