2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000002951

Entity Name: INTELLECTUAL TECHNOLOGY, INC.

FILED Apr 23, 2007 Secretary of State

Current Pr	incipal Place	of Business:	New Princi	New Principal Place of Business:		
1040 JOSH VISTA, CA			SUITE A	1926 KELLOGG AVENUE SUITE A CARLSBAD, CA 92008		
Current Ma	iling Addres	s:	New Mailir	New Mailing Address:		
1040 JOSHUA WAY VISTA, CA 920817807			SUITE A	1926 KELLOGG AVENUE SUITE A CARLSBAD, CA 92008		
FEI Number:	84-1130227	FEI Number Applied For () FEI No	umber Not Appli	cable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of N	ew Registered Agent:	
CORPORATE CREATIONS ENTERPRISES INC. 941 FOURTH STREET, #200 MIAMI BEACH, FL 33139 US						
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:						
	Electron	ic Signature of Registered Agent			Date	
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PT () LITCHIN, VASIL 1001 LA PLUMA SAN MARCOS,	СТ	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () LITCHIN, NICOL 6401 CONSTITU FORT WAYNE,	JTION DR	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () FULLER, WALT 217 E RAILROA GARRETT, IN 4	D ST	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () MORROW, BRA 9025 E JENAN I SCOTTSDALE,	OR	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () WELCH, CHRIS 920 SYCAMORI VISTA, CA 9208	E AVE #62	Title: Name: Address: City-St-Zip:	D (X) WELCH, CHRIS 8129 TILKUNI D LAS VEGAS, NV	RIVE	
Title: Name: Address: City-St-Zip:	D () HOLMES, GILBI 1501 W. WASH INDIANAPOLIS,	INGTON ST	Title: Name: Address: City-St-Zip:	()	Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CRAIG LITCHIN PRES 04/23/2007