

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000025795

FILED  
Apr 02, 2009  
Secretary of State

Entity Name: INVENTION TECHNOLOGIES, INC.

**Current Principal Place of Business:**

2655 LEJEUNE ROAD  
SUITE 550  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

2655 LEJEUNE ROAD  
SUITE 550  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number: 65-0677748      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

POLLACK, GARY  
ONE SOUTHEAST 3RD AVE  
SUITE 1260  
MIAMI, FL 33131 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PVPS ( ) Delete  
Name: DORAN, PETER  
Address: 3109 GRAND AVENUE #305  
City-St-Zip: COCONUT GROVE, FL 33133

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: PETER DORAN

PVPS

04/02/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date