

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 22, 2004 08:00 AM
Secretary of State

DOCUMENT # L00000006239	
1. Entity Name INNOVATION CAPITAL LLC	

Principal Place of Business 8000 N FEDERAL HIGHWAY THIRD FLOOR BOCA RATON, FL 33487	Mailing Address 8000 N FEDERAL HIGHWAY THIRD FLOOR BOCA RATON, FL 33487
---	---

DO NOT WRITE IN THIS SPACE



03182004 No Chg-LLC CR2E083 (10/03)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HAMILTON, REBECCA
C/O SACHS, SAX & KLEIN, P. A.
301 YAMATO RD N TRUST PLAZA STE 4150
BOCA RATON, FL 33431

DO NOT WRITE
IN THIS SPACE

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 _____ (Signature, typed or printed name of registered agent and DDE if applicable) (NOTE: Registered Agent signature required when replacing) DATE

Filing Fee is \$50.00 Due by May 1, 2004

U000000094316
03/22/04-80054-017 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JORDAN, BRUCE 8000 N. FEDERAL HIGHWAY, THIRD FLR BOCA RATON, FL 33487
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 808, Florida Statutes.

SIGNATURE:  **Bruce Jordan** **3-19-04** **561-953-5052**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #