

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F02000001997

**FILED**  
**Mar 06, 2012**  
**Secretary of State**

**Entity Name:** INNOVATIVE NEW MEDIA SOLUTIONS, INC.

**Current Principal Place of Business:**

2048 N E GINGER TERRACE  
JENSEN BEACH, FL 34957

**New Principal Place of Business:**

**Current Mailing Address:**

2048 N E GINGER TERRACE  
JENSEN BEACH, FL 34957

**New Mailing Address:**

**FEI Number:** 36-4237809

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PUSATERI, PAMELA  
2048 N E GINGER TERRACE  
JENSEN BEACH, FL 34957 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

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: PUSATERI, JOHN J  
Address: 2048 N E GINGER TERRACE  
City-St-Zip: JENSEN BEACH, FL 34957

Title: VP  
Name: PUSATERI, PAMELA A  
Address: 2048 NE GINGER TERRACE  
City-St-Zip: JENSEN BEACH, FL USA 34

I hereby 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 all other like empowered.

SIGNATURE: PAMELA A PUSATERI

VP

03/06/2012

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

\_\_\_\_\_  
Date