

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000000635

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: INNOVA ROBOTICS & AUTOMATION, INC.

## Current Principal Place of Business:

15870 PINE RIDGE RD  
SUITE 3  
FT. MYERS, FL 33908

## New Principal Place of Business:

## Current Mailing Address:

17105 SAN CARLOS BLVD., A6-151  
FT. MYERS BEACH, FL 33931

## New Mailing Address:

FEI Number: 95-4868120

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBISON, LINDA  
2659 W. GULF DRIVE, UNIT B-102  
SANIBEL, FL 33957 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: CPT ( ) Delete  
Name: WEISEL, WALTER K  
Address: 6624 DANIELS CT.  
City-St-Zip: FT. MYERS, FL 33908

Title: S ( ) Delete  
Name: AWS, SHERI  
Address: 12621 KELLY SANDS WAY, UNIT 328  
City-St-Zip: FT. MYERS, FL 33908

Title: D ( ) Delete  
Name: NIELSON, MARTIN  
Address: 101 FIRST ST. #493  
City-St-Zip: LOS ALTOS, CA 94022780

Title: D ( ) Delete  
Name: MCNEAR, GARY  
Address: 11451 WELLFLEET DR.  
City-St-Zip: FT. MYERS, FL 33908

Title: D ( ) Delete  
Name: CONKLIN, CRAIG  
Address: 16241 TIDEWATER ISLAND CIRCLE  
City-St-Zip: FT. MYERS, FL 33908

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: WALTER WEISEL

CPT

04/27/2007

Electronic Signature of Signing Officer or Director

Date