2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004348

FILED Apr 27, 2008 Secretary of State

Entity Name: INNOVATIVE GOVERNMENT TELECOM SOLUTIONS, INC.

Current Principal Place of Business:		New Principal Plac	New Principal Place of Business:	
•			New Principal Place of Business:	
	ACKER DR., STI 9, IL 60606	E. 2510		
Current Mailing Address: 5909 NW EXPRESSWAY, STE. 403 OKLAHOMA CITY, OK 73132		New Mailing Address: 5909 NW EXPRESSWAY, STE. 101 OKLAHOMA CITY, OK 73132		
				FEI Number
Name and	d Address of Co	ırrent Registered Agent:	Name and Address	of New Registered Agent:
1200 S. PI	ORATION SYS ⁻ NE ISLAND RD ION, FL 33324			
	e named entity si e of Florida.	ubmits this statement for the	purpose of changing its register	red office or registered agent, or both,
	e of Florida.	ubmits this statement for the	purpose of changing its register	red office or registered agent, or both,
in the Stat	e of Florida. RE:	ubmits this statement for the		red office or registered agent, or both, Date
in the State	e of Florida. [*] RE: <u>Electroni</u>			
in the State SIGNATUI	e of Florida. [*] RE: <u>Electroni</u>	c Signature of Registered Ag Trust Fund Contribution ().	ent	
in the State SIGNATUI Election Car OFFICER Title: Name: Address:	e of Florida. RE: Electroni mpaign Financing S AND DIRECT	c Signature of Registered Ag Trust Fund Contribution (). ORS: Delete DR., STE. 2510	ent	Date
in the State SIGNATUI	e of Florida. RE: Electroni mpaign Financing S AND DIRECT CEOP () I SMAT, DAVID J. 125 S. WACKER CHICAGO, IL 60	C Signature of Registered Ag Trust Fund Contribution (). ORS: Delete DR., STE. 2510 606 Delete DR., STE. 2510	ent ADDITIONS/CHANG Title: Name: Address:	Date GES TO OFFICERS AND DIRECTOR

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: DAVID SMAT PDT 04/27/20)8
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