

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **M72664** (9)  
1. Corporation Name  
**INNOVATIVE FABRICATION, INC.**



Principal Place of Business  
**755 INDUSTRY ROAD SOUTH  
COCOA FL 32926  
US**

Mailing Address  
**755 INDUSTRY ROAD SOUTH  
COCOA FL 32926  
US**

3. Date Incorporated or Qualified  
**03/14/1988**

3a. Date of Last Report  
**06/09/1995**

4. FEI Number  
**65-0033059**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business  
21  
Suite, Apt. #, etc.  
22  
City & State  
23  
Zip  
24  
Country  
25

2a. Mailing Address  
26  
Suite, Apt. #, etc.  
27  
City & State  
28  
Zip  
29  
Country  
30

9. Name and Address of Current Registered Agent

**FISHER TERENCE S  
7260 JUPER ROAD  
COCOA FL 32927**

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code  
**FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and then the corporate

(831) Registered Agent signature required when re-registering

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
	<b>PVST</b>			<input type="checkbox"/>
	<b>FISHER, TERENCE S.</b>			
	<b>7260 JUPER ROAD</b>			
	<b>COCOA FL 32927</b>			
	<b>D</b>			<input type="checkbox"/>
	<b>FISHER, TERENCE S.</b>			
	<b>7260 JUPER ROAD</b>			
	<b>COCOA FL 32927</b>			
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE	Change	Addition
1.1				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.2						
1.3						
1.4						
2.1				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.2						
2.3						
2.4						
3.1				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.2						
3.3						
3.4						
4.1				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.2						
4.3						
4.4						
5.1				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.2						
5.3						
5.4						
6.1				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.2						
6.3						
6.4						

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Terrence S. Fisher*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*4/29/96* *407/030 0555*  
DATE DAYTIME PHONE #

CR2E034 (12/95)