

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009960

FILED  
Apr 25, 2008  
Secretary of State

Entity Name: THE INNOVATION FOUNDATION, INC.

## Current Principal Place of Business:

2811 SW 3 AVE  
MIAMI, FL 33129

## New Principal Place of Business:

1798 ESPANOLA DRIVE  
MIAMI, FL 33133

## Current Mailing Address:

2811 SW 3 AVE  
MIAMI, FL 33129

## New Mailing Address:

1798 ESPANOLA DRIVE  
MIAMI, FL 33133

FEI Number: 26-1190499

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EDWARDS, WILLIAM  
2811 SW 3 AVE  
MIAMI, FL 33129 US

## Name and Address of New Registered Agent:

EDWARDS, WILLIAM  
1798 ESPANOLA DRIVE  
MIAMI, FL 33133 US

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:

04/25/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: EDWARDS, WILLIAM  
Address: 1798 ESPANOLA DR  
City-St-Zip: MIAMI, FL 33133

Title: D ( ) Delete  
Name: CABRERA, AIMEE  
Address: 2811 SW 3 AVE  
City-St-Zip: MIAMI, FL 33129

Title: D ( ) Delete  
Name: COOK, WILLIAM R  
Address: 2223 SW 13 AVE. #37  
City-St-Zip: MIAMI, FL 33145

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: CABRERA, AIMEE  
Address: 305 GALEN DRIVE APT 309  
City-St-Zip: KEY BISCAYNE, FL 33149

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM EDWARDS

D

04/25/2008

Electronic Signature of Signing Officer or Director

Date