2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000095113

FILED Feb 02, 2004 Secretary of State

| Entity Name: INNOVATIVE PAYROLL INC. | | | | | | |
|---|--|---|---|--|---|--|
| Current Principal Place of Business: | | | New Principal Place of Business: | | | |
| 640 N. SEM ORLANDO, | 10RAN BLVD. , FL 32803 | | | | | |
| Current Mailing Address: | | | New Mailing Address: | | | |
| 640 N. SEM ORLANDO, | IORAN BLVD. , FL 32803 | | | | | |
| FEI Number: 14-1857503 FEI Number Applied For () | | FEI Number Not Applicable () Certificate of Status Desired () | | | | |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: | | | | | | |
| WINTER PA | ESS RESERV ARK, FL 3289 | 2 US | acco of changing it | re registered | Laffice or registered egent, or both | |
| in the State | | ubmits this statement for the purp | oose or changing it | .s registerea | office or registered agent, or both, | |
| SIGNATUR | E: | | | | | |
| Electronic Signature of Registered Agent | | | | | Date | |
| Election Cam | paign Financing | Trust Fund Contribution (). | | | | |
| OFFICERS AND DIRECTORS: | | | ADDITION | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | SOLANO, PAUL | RESERVE PLACE | Title: Name: Address: City-St-Zip: | SOLANO, PA 698 BARRING | (X) Change()Addition UL GTON CIRCLE RINGS, FL 32708 US | |
| Title: Name: Address: City-St-Zip: | SOLANO, DIANE | RESERVE PLACE | Title: Name: Address: City-St-Zip: | SOLANO, DIA 698 BARRING | (X) Change () Addition ANE GTON CIRCLE RINGS, FL 32708 US | |
| Title: Name: Address: City-St-Zip: | D () KOZLOWSKI, C 14812 VIA WING ORLANDO, FL | SHURST CT. | Title: Name: Address: City-St-Zip: | KOZLOWSKI | EFFERSON STREET | |
| Title: Name: Address: City-St-Zip: | D () KOZLOWSKI, D 14812 VIA WING ORLANDO, FL | SHURST CT. | Title: Name: Address: City-St-Zip: | KOZLOWSKI | EFFERSON STREET | |
| Title: Name: Address: City-St-Zip: | D () AVILES, JOYLYI 8987 FORT JEF ORLANDO, FL | FERSON | Title: Name: Address: City-St-Zip: | D (AVILES, JOY 640 N SEMO ORLANDO, F | RAN BLVD | |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHRIS KOZLOWSKI 02/02/2004 D