

# **2004 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P01000062616

**FILED**  
**Oct 20, 2004**  
**Secretary of State**

**Entity Name:** INNOVATIVE BUSINESS RESOURCES CORPORATION

**Current Principal Place of Business:**

1850 43RD AVE., STE. C-9  
VERO BEACH, FL 32960

**New Principal Place of Business:**

5976 20TH ST  
NO 107  
VERO BEACH, FL 32966

**Current Mailing Address:**

1850 43RD AVE., STE. C-9  
VERO BEACH, FL 32960

**New Mailing Address:**

5976 20TH ST  
NO 107  
VERO BEACH, FL 32966

**FEI Number:** 59-3728347

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

SMITH, ROBERT W  
C/O INNOVATIVE BUSINESS RESOURCES CORP.  
1850 43RD AVE., STE. C-9  
VERO BEACH, FL 32960 US

**Name and Address of New Registered Agent:**

SMITH, ROBERT W  
C/O INNOVATIVE BUSINESS RESOURCES CORP.  
5976 20TH ST, NO 107  
VERO BEACH, FL 32966 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: ROBERT W SMITH

10/20/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: SMITH, ROBERT W  
Address: 1850 43RD AVE., STE. C-3  
City-St-Zip: VERO BEACH, FL 32960

Title: VP (X) Delete  
Name: SMITH, KELLEY J  
Address: 1850 43RD AVE., STE. C-3  
City-St-Zip: VERO BEACH, FL 32960

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: ROBERT W SMITH

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10/20/2004

Electronic Signature of Signing Officer or Director

Date