

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000083672

Entity Name: MS INNOVATIONS INC.

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

12555 BISCAYNE BLVD, 882  
NORTH MIAMI, FL 33181

**New Principal Place of Business:**

12555 BISCAYNE BLVD. #882  
NORTH MIAMI, FL 33181

**Current Mailing Address:**

12555 BISCAYNE BLVD, 882  
NORTH MIAMI, FL 33181

**New Mailing Address:**

12555 BISCAYNE BLVD. #882  
NORTH MIAMI, FL 33181

FEI Number: 65-1152420

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STAR, MARK  
12555 BISCAYNE BLVD  
882  
NORTH MIAMI, FL 33181 US

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

STAR, MARK  
12555 BISCAYNE BLVD #882  
NORTH MIAMI, FL 33181 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: MARK STAR

03/15/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MARK, STAR  
Address: 12555 BISCAYNE BLVD #882  
City-St-Zip: NORTH MIAMI, FL 33181

I hereby 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 all other like empowered.

SIGNATURE: MARK STAR

PRES

03/15/2011

Electronic Signature of Signing Officer or Director

Date