## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## **Secretary of State DOCUMENT # P01000103821** 01-23-2006 90112 028 \*\*\*150.00 1. Entity Name IN-O-VATE TECHNOLOGIES, INC. Mailing Address Principal Place of Business 810 SATURN ST 810 SATURN ST 66002234 422-JUPITER FL 33477 JUPITER FL 33477 2. Principal Place of Business 3. Malting Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01122006 CR2E034 (11/05) Cho-P 井ダル Applied For City & State 4. FEI Number City & State 01-0553308 Not Applicable Zio Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RYAN, JAMES H ESQ. Street Address (P.O. Box Number is Not Acceptable) 701 U.S. HIGHWAY 1, SUITE 402 NORTH PALM BEACH, FL 33408 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Sgreture, typed or printed name of regritimed agent and life of applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PD TITLE Deleta TITLE ☐ Change HARPENAU, RICHARD J NAME NAME 6190 SAND PINE COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JUPITER, FL 33458 CITY-ST-ZIP VSTD TITLE Delete MLE Change Addition HARPENAU, KAREN A NAME 6190 SAND PINE COURT STREET ADORESS STREET ADDRESS CITY-ST-ZP JUPITER, FL 33458 CITY-ST-ZIP THE Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST:ZIP CITY - ST - 712 TITLE ☐ Delete TILE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-71P CITY-ST-ZEP MILE Delete TITLE ☐ Chance ☐ Addition NAME NALLE STREET ADDRESS STREET ADDRESS CITY-ST-71P CITY-ST-ZIP MILE ☐ Delete MIF ☐ Change ☐ Addition MALIF NAME STREET ADDRESS STREET ADDRESS CITY-ST-77P 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an efficier 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

h Aro HARPEN

FILED Feb 23, 2006 8:00 am