


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000076324
 1. Entity Name
 INNOVATIONS & PROPERTY MANAGEMENT, INC.



Principal Place of Business Mailing Address
 17727 GREY EAGLE RD. 17727 GREY EAGLE RD.
 TAMPA, FL 33647 TAMPA, FL 33647

DO NOT WRITE IN THIS SPACE



01112006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
 20-0000144 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 JANER, EDGARD
 17727 GREY EAGLE RD.
 TAMPA, FL 33647

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing \$5.00 May Be
 Trust Fund Contribution Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JANER, EDGARD 17727 GREY EAGLE RD. TAMPA, FL 33647
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD ROLON, ETHEL 17727 GREY EAGLE RD. TAMPA, FL 33647
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 01/24/06-80094-002 150.00

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12. I hereby certify that the information supplied with this filing 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with an office, like empowered.

SIGNATURE: Edgard Janer Date: 1/17/06 Daytona Phone #: 813-973-3288

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #