

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000106169

FILED
Apr 19, 2005
Secretary of State

Entity Name: INNOVATIVE SHADE SYSTEMS, INC.

Current Principal Place of Business:

2685 BRIM WAY
COOPER CITY, FL 33026

New Principal Place of Business:

2924 N. BELMONT LANE
COOPER CITY, FL 33026

Current Mailing Address:

2685 BRIM WAY
COOPER CITY, FL 33026

New Mailing Address:

2924 N. BELMONT LANE
COOPER CITY, FL 33026

FEI Number: 55-0802979

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAYE, HOWARD
2685 BRIM WAY
COOPER CITY, FL 33026 US

Name and Address of New Registered Agent:

KAYE, HOWARD
2924 N. BELMONT LANE
COOPER CITY, FL 33026 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:

04/19/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KAYE, HOWARD
Address: 2685 BRIM WAY
City-St-Zip: COOPER CITY, FL 33026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KAYE, HOWARD
Address: 2924 N. BELMONT LANE
City-St-Zip: COOPER CITY, FL 33026

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: HOWARD KAYE

PD

04/19/2005

Electronic Signature of Signing Officer or Director

Date