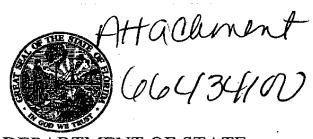
2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Sep 24, 2004 8:00 am

	ANNOAL HEFORE (ASI)					.,	~	
DOCUMENT # P03000120206 1. Entity Name					Secretary of State 08-23-2004 90014 016 ***163.75			
INNOVATIVE NETWORK/DATA MANAGEMENT INC.								
Principal Place of Business Mailing Address								
1015 BRYCE 1015 BRYCE W MELBOURNE FL 32904 W MELBOURNE FL 32904					20494100			
						78 ETTTI XIII 1181 BAUS 1181 BAUS 1		
Principal Place of Business Address Mailing Address								
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Apt. #, etc.		MOORE	CR2E034 (4/04)		
City & State		City & State		1	1. FEI Number 04-3778619	⊢	oplied For of Applicable	
Zip	Country	Zip	Country	5	5. Certificate of Status Desired	\$9.75 Ad	ditional	
	6. Name and Address of Current	Registered Agent		. 7	. Name and Address of New	Registered Agent		
PARHAM, IAN 1015 BRYCE W MELBOURNE FL 32904								
				-Street Address (P.O. Box Number is Not Acceptable)				
77 14	ELDOURINE FL 32904	•						
		-	City			FL Zip Cod	le ·	
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 lamiliar with, and accept the obligations of registered agent.								
SIGNATURE Signature, types of printed name of registered agent and title of applicable. (NOTE: Registered Agent signature required when reinstraing) CATE								
2500 PM PM 2500 10 10 10 10 10 10 10 10 10 10 10 10 1								
FILE NOW!!! FEE IS \$550.00 S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it								
	Payable to Florida Department of		rior notice. Fee to fi	•		ontribution. M Adde	ed to Fees	
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/CHANGES TO OF	FICERS AND DIRECTOR	S IN 11	
TITLE .	DP '	Delete	TITLE			☐ Change	Addition	
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HAME			NAME			*	1	
STREET ADDRESS	,		STREET ADDRESS		0		ļ	
CITY-ST-ZIP			CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify 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 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 tryatee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if								

NO-11-80



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

August 25, 2004

INNOVATIVE NETWORK/DATA MANAGEMENT INC. 1015 BRYCE W MELBOURNE, FL 32904

Subject: INNOVATIVE NETWORK/DATA MANAGEMENT INC.

Reference Number:

~P03000120206

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$163.75; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/RG ANNUAL REPORTS SECTION