

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000141421

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: INNOVATIVE COMPUTER'S AND TECHNOLOGIE'S INC

## Current Principal Place of Business:

4664 WESTGROVE WAY  
ORLANDO, FL 32808 US

## New Principal Place of Business:

## Current Mailing Address:

4664 WESTGROVE WAY  
ORLANDO, FL 32808 US

## New Mailing Address:

FEI Number: 73-1686741      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

THOMAS, JOHNNY A  
1792 TALLO WAY  
ORLANDO, FL 32808 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: THOMAS, JOHNNY  
Address: 1792 TALLO WAY  
City-St-Zip: ORLANDO, FL 32808 US

Title: S ( ) Delete  
Name: WAY, TONYA  
Address: 890 BEACHMOUNT CT  
City-St-Zip: ORLANDO, FL 32808

Title: T ( ) Delete  
Name: THOMAS, TREVA  
Address: 1792 TALLOWAY  
City-St-Zip: ORLANDO, FL 32808

Title: D ( ) Delete  
Name: HOLLIS, ANTHONY  
Address: PO BOX 182  
City-St-Zip: ORLANDO, FL 32808

Title: D ( ) Delete  
Name: CICAL, HOLLAR  
Address: 987 LAKE DARBY RD  
City-St-Zip: GOTHAM, FL 34734

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: JOHNNY THOMAS

P

04/29/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date