2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000151376

Entity Name: COMPOSITE INNOVATIONS, INC

FILED Feb 22, 2005 Secretary of State

Littly Nai	ine. Colvinos	BITE INNOVATIONS, INC.			
Current Principal Place of Business:			New Principal Place of I	New Principal Place of Business:	
	HNOLOGY DR RNE, FL 32904		2835 N HWY A1A 704 MELBOURNE, FL 32904	US	
Current M	lailing Addres	s:	New Mailing Address:	New Mailing Address:	
	HNOLOGY DR RNE, FL 32904		2835 N HWY A1A 704 MELBOURNE, FL 32904	US	
FEI Number:	: 20-0501756	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of N	Name and Address of New Registered Agent:	
MELBOUR The above	HNOLOGY DR RNE, FL 32904	l US	purpose of changing its registered of	fice or registered agent, or both,	
SIGNATUR					
0.014/1101		ic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PT () JOHNSON, KEI 2835 HWY A1A INDIALANTIC, F	UNIT 704	Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	VS () LEWIT, SCOTT 1975 RIVER SH INDIALANTIC, F	IORE DR	Title: () Name: Address: City-St-Zip:	Change () Addition	

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: KEITH G. JOHNSON PRES 02/22/2005