2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P04000080274

1. Entity Name

INNOVATIVE HOME MANAGEMENT, INC.



FILED
Apr 02, 2007 08:00 AM
Secretary of State

Principal Place of Business

13650 N. 12TH ST., STE. C TAMPA, FL 33613 Mailing Address

P. O. BOX 280031 TAMPA, FL 33682



03282007

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-1460548

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SILVER, JAY 13650 N. 12TH ST., STE. C TAMPA, FL 33613

changed, or on an attachment with

SIGNATURE:

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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. Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered A				Agent signature required when reinstating) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees		\$5.00 May Be Added to Fees	U00000688181 04/10/07-80068-022 158.75	
10. OFFICERS AND DIRECTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SILVER, JAY 13650 N. 12TH ST., STE. C TAMPA, FL 33613					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE			
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TITLE NAME STREET ADDRESS CITY-ST-7IP						

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 trusted impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if