

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000094877

FILED
Jul 12, 2006
Secretary of State

Entity Name: INNOVATION STAR SERVICES, INC.

Current Principal Place of Business:

8685 CHICKASAW FARM LANE
ORLANDO, FL 32825

New Principal Place of Business:

4531 COVE DRIVE
APT 102
ORLANDO, FL 32812

Current Mailing Address:

8685 CHICKASAW FARM LANE
ORLANDO, FL 32825

New Mailing Address:

4531 COVE DRIVE
APT 102
ORLANDO, FL 32812

FEI Number: 20-1270724

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

URIBE, CARMEN A
1118 PINE SAP CT
ORLANDO, FL 32825 US

Name and Address of New Registered Agent:

URIBE, CARMEN A
4531 COVE DRIVE
APT 102
ORLANDO, FL 32812 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: CARMEN A URIBE

07/12/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: URIBE, CARMEN A
Address: 1118 PINE SAP CT
City-St-Zip: ORLANDO, FL 32825

Title: VP () Delete
Name: VALDES, MARIA
Address: 8685 CHICKSAW FARM LANE
City-St-Zip: ORLANDO, FL 32825

Title: T (X) Delete
Name: PERDOMO, CARLOS F
Address: 1118 PINE SAP CT
City-St-Zip: ORLANDO, FL 32825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: URIBE, CARMEN A
Address: 4531 COVE DRIVE APT 102
City-St-Zip: ORLANDO, FL 32812

Title: T (X) Change () Addition
Name: PERDOMO, CARLOS
Address: 4531 COVE DRIVE APT 102
City-St-Zip: ORLANDO, FL 32812

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

I hereby certify that the information supplied with this filing does not qualify for the 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: CARMEN A URIBE

P

07/12/2006

Electronic Signature of Signing Officer or Director

Date