

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000072555

FILED
Feb 06, 2007
Secretary of State

Entity Name: INNOVATIVE MATERIALS DEVELOPMENT COMPANY

Current Principal Place of Business:

7005 NW 18 AVE
GAINESVILLE, FL 32605 US

New Principal Place of Business:

Current Mailing Address:

7005 NW 18 AVE
GAINESVILLE, FL 32605 US

New Mailing Address:

FEI Number: 32-0152175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PYE, THOMAS G
3909 W NEWBERRY ROAD
SUITE C
GAINESVILLE, FL 32607 US

Name and Address of New Registered Agent:

GOSWAMI, TUSHAR
7005 NW 18TH AVE
GAINESVILLE, FL 32605 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: TUSHAR GOSWAMI

02/06/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: GOSWAMI, TUSHAR
Address: 7005 NW 18 AVE
City-St-Zip: GAINESVILLE, FL 32605 US

Title: D () Delete
Name: GOSWAMI, SHEEL
Address: 7005 NW 18 AVE
City-St-Zip: GAINESVILLE, FL 32605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: TUSHAR GOSWAMI

P

02/06/2007

Electronic Signature of Signing Officer or Director

Date