2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000041088

Entity Name: INNOVIDA HOLDINGS, INC.

FILED Apr 03, 2008 Secretary of State

Current Princip	pal Place of Business:	New Principal Place of Business

CHARLES H. GELMAN, P.A. 560 LINCOLN ROAD SUITE 1025, 25 S.E. 2ND AVENUE SUITE 303 MIAMI, FL 33131 MIAMI, FL 33139

Current Mailing Address:

CHARLES H. GELMAN, P.A. HARPER MEYER PEREZ FERRER & HAGEN LLP SUITE 1025, 25 S.E. 2ND AVENUE 701 BRICKELL AVENUE, STE 1400 MIAMI, FL 33131 MIAMI, FL 33131

FEI Number: 20-4540103 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

New Mailing Address:

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CHARLES H. GELMAN, P.A. LAW CENTER OF THE AMERICAS, LLC 25 S.E. 2ND AVENUE 701 BRICKELL AVENUE **SUITE 1025** SUITE 1400 MIAMI, FL 33131 US MIAMI, FL 33131 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: STEVEN H. HAGEN, VP 04/03/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: () Change () Addition

OSORIO, CLAUDIO Name: Name: 560 LINCOLN ROAD, SUITE 303 Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip:

Title: Title: () Delete (X) Change () Addition Name: YESIL. ENGIL Name: TOLL, CRAIG

560 LINCOLN ROAD, SUITE 303 560 LINCOLN ROAD, SUITE 303 Address: Address: MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139 City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: SEC () Delete D/S OSORIO, AMARILIS OSORIO, AMARILIS Name: Name:

560 LINCOLN ROAD, SUITE 303 560 LINCOLN ROAD, SUITE 303 Address: Address: City-St-Zip: MIAMI BEACH,, FL 33139 City-St-Zip: MIAMI BEACH, FL 33139

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: CRAIG TOLL 04/03/2008 Τ