

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000046640

Entity Name: MINNOVATIVE SOLUTIONS INC.

FILED
May 02, 2008
Secretary of State

Current Principal Place of Business:

12850 W STATE RD 84 - 16 FOREST LANE
#9-27
DAVIE, FL 33325

New Principal Place of Business:

2817 NE 4TH AVE
CAPE CORAL, FL 33909

Current Mailing Address:

12850 W STATE RD 84
#9-27
DAVIE, FL 33325

New Mailing Address:

2817 NE 4TH AVE
CAPE CORAL, FL 33909

FEI Number: 14-1956305

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANGONE, MARIA
12850 W STATE RD 84 - 16 FOREST LANE
#9-27
DAVIE, FL 33325 US

Name and Address of New Registered Agent:

GOMEZ, NELSON M PRESIDE
2817 NE 4TH AVE
CAPE CORAL, FL 33909 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: NELSON M. GOMEZ

05/02/2008

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: PSTD () Delete
Name: LANGONE, MARIA
Address: 12850 W STATE RD 84 #9-27
City-St-Zip: DAVIE, FL 33325

Title: V () Delete
Name: GOMEZ, NELSON MIGUEL
Address: 12850 W STATE RD 84 #9-27
City-St-Zip: DAVIE, FL 33325

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SEC (X) Change () Addition
Name: LANGONE, MARIA
Address: 2817 NE 4TH AVE
City-St-Zip: CAPE CORAL, FL 33909

Title: PRES (X) Change () Addition
Name: GOMEZ, NELSON MIGUEL
Address: 2817 NE 4TH AVE
City-St-Zip: CAPE CORAL, FL 33909

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: NELSON M. GOMEZ

PRES

05/02/2008

Electronic Signature of Signing Officer or Director

Date