

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000076208

FILED
Aug 08, 2007
Secretary of State

Entity Name: INNOVATIVE BEVERAGE SOLUTIONS INC

Current Principal Place of Business:

1005 BEARDED OAKS TERRACE
LONGWOOD, FL 32779

New Principal Place of Business:

1158 NEEDLEWOOD LOOP
OVIEDO, FL 32765 US

Current Mailing Address:

1005 BEARDED OAKS TERRACE
LONGWOOD, FL 32779

New Mailing Address:

1158 NEEDLWOOD LOOP
OVIEDO, FL 32765

FEI Number: 20-4968977

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WELLS, JOHN
1005 BEARDED OAKS TERRACE
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

WELLS, JOHN
1158 NEEDLEWOOD LOOP
OVIEDO, FL 32765 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: JOHN WELLS

08/08/2007

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: WELLS, JOHN
Address: 1005 BEARDED OAKS TERRACE
City-St-Zip: LONGWOOD, FL 32779

Title: VP () Delete
Name: EDMONDS, JOHN P
Address: 3490 STARBIRD DR
City-St-Zip: OCOEE, FL 34761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WELLS, JOHN
Address: 1158 NEEDLWOOD LOOP
City-St-Zip: OVIEDO, FL 32765

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

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: JOHN WELLS

PRES

08/08/2007

Electronic Signature of Signing Officer or Director

Date