

# 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