H09000229951

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
09 OCT 29 AM 5:55
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P07000033656

1. Corporation Name

INNOVATIVE ELECTRONIC DATA SERVICES INC.

REINSTATEMENT 08-09

CR2E081 (12/08)

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
17654 CIRCLE POND CT	17654 CIRCLE POND CT
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: BOCA RATON FL	City & State: BOCA RATON FL
Zip: 33496 Country: USA	Zip: 33496 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 03/15/2007

5. FEI Number: ☐ Applied For ☑ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee Required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: CORPORATE CREATIONS NETWORK, INC.

Street Address (P.O. Box Number is Not Acceptable): 11380 PROSPERITY FARMS ROAD #221E

Suite, Apt. #, Etc.:

City: Palm Beach Gardens State: FL Zip Code: 33410

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0505, F.S.

Signature of Registered Agent: Valerie Hawk Valerie Hawk, Special Secretary Date: 10/28/09

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	STACY MCCALL	17654 CIRCLE POND CT	BOCA RATON FL 33496
			JC 10/29

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Stacy McCall STACY MCCALL, D 10-28-09 954 949-9500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Florida Department of State
Division of Corporations
Public Access System

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To:
Division of Corporations
Fax Number : (850)617-6384

From:
Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)694-1639

CORPORATION REINSTATEMENT

INNOVATIVE ELECTRONIC DATA SERVICES INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	~~$900.00~~

$300 - penalty waived

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