

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000043760

FILED
Feb 24, 2009
Secretary of State

Entity Name: INNOVATIVE SPINAL SOLUTIONS, INCORPORATED

Current Principal Place of Business:

1959 SERVICE RD
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

1959 SERVICE RD
NORTH PALM BEACH, FL 33408 US

Current Mailing Address:

1959 SERVICE RD
NORTH PALM BEACH, FL 33408

New Mailing Address:

1959 SERVICE RD
NORTH PALM BEACH, FL 33408 US

FEI Number: 20-8808185

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DYER, BONNY S
1959 SERVICE RD
NORTH PALM BEACH, FL 33408 US

Name and Address of New Registered Agent:

DYER, BONNY S
1810 OLD OKEECHOBEE RD
WEST PALM BEACH, FL 33409 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: BONNY S. DYER

02/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: BONNY, DYER
Address: 1959 SERVICE RD
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: BONNY, DYER C BONNY D
Address: 1959 SERVICE RD
City-St-Zip: NORTH PALM BEACH, FL 33408 US

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: BONNY S. DYER

V

02/24/2009

Electronic Signature of Signing Officer or Director

Date