


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 24, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P93000063210</b>		
1. Entity Name <b>INNOVATIVE PRINTING, INC.</b>		
Principal Place of Business <b>4700 PARKWAY COMMERCE BLVD BUILDING 605 STE. A ORLANDO, FL 32808</b>	Mailing Address <b>4700 PARKWAY COMMERCE BLVD BUILDING 605 STE. A ORLANDO, FL 32808</b>	
<b>DO NOT WRITE IN THIS SPACE</b>		



01212004 No Chg-P CR2E034 (10/03)

4. FEI Number <b>59-3200098</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  <b>TAYLOR, RICHARD W. 112 N FLORIDA AVE DELAND, FL 32720</b>
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**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP WINKELSAS, LAYNE A 449 WHISPERING OAK LANE APOPKA, FL 32712
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01/26/04-80020-015 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**  **LAYNE WINKELSAS** **1/21/04** **407 293 8777**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #