

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000009000

FILED  
May 05, 2004  
Secretary of State

Entity Name: INNOVATIVE PRODUCTS AND SERVICES, INC.

**Current Principal Place of Business:**

12943 SW 133RD COURT  
MIAMI, FL 33186 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 832497  
MIAMI, FL 332832497

**New Mailing Address:**

FEI Number: 65-0639509

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MANZANO, BARBARA  
7770 SW 134 AVE  
MIAMI, FL 33183 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

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: MANZANO, BARBARA  
Address: 7770 SW 134 AVE  
City-St-Zip: MIAMI, FL

Title: VP ( ) Delete  
Name: MANZANO, ULISES  
Address: 7770 SW 134 AVE  
City-St-Zip: MIAMI, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BARBARA MANZANO

P

05/05/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date