## P98000005915

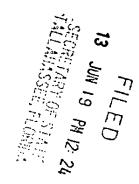
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## **COVER LETTER**

Division of Corporations
SUBJECT: Innovative Data Services, Inc. Name of Corporation
DOCUMENT NUMBER: P9800005915
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Lenard Schenker  Name of Contact Person  Linnovative Data Svcs.  Firm/Company  1700 S. Dixie Hwy / Ste 200  Address  Boca Raton, FL 33432  City/State and Zip Code  Lenanchor Computer. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tohn Ferrentino at (631) 293-6100  Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

Amendment Section

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida.
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Involative Data Services, Inc.
2. The principal office address: 1700 S. DIXIE Hury Ste 200  Roca Raton, FU 33432
3. The mailing address (if different):
4. Date of incorporation/qualification: 1/20/1998 Document number: P9800005915
5. The name and street address of the current registered agent and registered office on file with the file for the following street address of the current registered agent and registered office on file with the file for the following street address of the current registered agent and registered office on file with the file for t
Brevda, Paul
TSOO W MC Nab Rd = 19 = B
Ft. Lauderdale, FL 3332F N
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Branda, Paul
4510 N. Federal Hwy #103  P.O. Box NOT acceptable
Lighthouse Point, FL 33064
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Signature of an officer or director  Lower Department or typed name and title
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is heing filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Signature of Registered Agent Date
If signing on behalf of an entity:
Hay Brevag

\* \* \* FILING FEE: \$35.00 \* \* \*