## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000008491

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

NORRISTOWN, PA 19403 US

1140 BAY ST., SUITE 4000

TORONTO, ON M552B4 CA

COOKE, DOUG

() Delete

FILED Apr 29, 2008 Secretary of State

Entity Nan	ie: INNOV	ATIVE SECURITY SOLUTIONS, I	NC.			
Current Principal Place of Business:			New Prin	New Principal Place of Business:		
3600 INVES WEST PAL	STMENT LA M BEACH, I	NE, #103 FL 33404				
Current Mailing Address:			New Mail	New Mailing Address:		
3600 INVESTMENT LANE, #103 WEST PALM BEACH, FL 33404			1201 HAY	C/O CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301		
FEI Number:	59-3504483	FEI Number Applied For ( )	FEI Number Not App	plicable ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
1201 HAYS TALLAHAS	STREET SEE, FL 32					
The above in the State		y submits this statement for the p	urpose of changing	its registered office or registered agent, or both,		
SIGNATUR	RE:					
	Electro	onic Signature of Registered Age	nt	Date		
Election Cam	ıpaign Financi	ing Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	FAIRBANKS, 3600 INVEST	( ) Delete JAMES MENT LANE, #103 BEACH, FL 33404 US	Title: Name: Address: City-St-Zip:	P (X) Change () Addition FAIRBANKS, JAMES 2450 BOULEVARD OF THE GENERALS NORRISTOWN, PA 19403		
Title: Name: Address: City-St-Zip:	BREWER, FF 2450 BLVD C	( ) Delete RANK J DF THE GENERALS /N, PA 19403 US	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition BREWER, FRANK J 2450 BLVD OF THE GENERALS NORRISTOWN, PA 19403		
Title: Name: Address:	PICHOLA, JO	( ) Delete OHN M OF THE GENERALS	Title: Name: Address:	ST (X) Change ( ) Addition PICHOLA, JOHN M 2450 BLVD OF THE GENERALS		

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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

NORRISTOWN, PA 19403

() Change () Addition

SIGNATURE: JOHN PICHOLA S 04/29/2008