

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000049068

Entity Name: INNVIRON CORPORATION

FILED  
May 26, 2009  
Secretary of State

## Current Principal Place of Business:

9900 W. SAMPLE ROAD  
SUITE 200-A  
CORAL SPRINGS, FL 33065 US

## New Principal Place of Business:

## Current Mailing Address:

10693 WILES RD.  
SUITE 301  
CORAL SPRINGS, FL 33076 US

## New Mailing Address:

FEI Number: 65-0839530      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

WILLIAMS, NEIL D CEO  
4902 NW 105 DR.  
CORAL SPRINGS, FL 33076 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: CEO ( ) Delete  
Name: WILLIAMS, NEIL  
Address: 4902 N.W. 105TH DR.  
City-St-Zip: CORAL SPRINGS, FL 33076 US

Title: VP ( ) Delete  
Name: ROBERTS, TOM R  
Address: 10693 WILES ROAD, SUITE 301  
City-St-Zip: CORAL SPRINGS, FL 33076 US

## 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 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: DR. NEIL D WILLIAMS

CEOP

05/26/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date