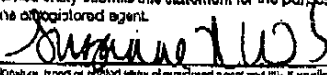
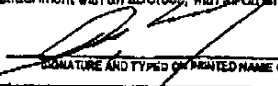


FILED
Jul 25, 2005 8:00 am
Secretary of State

07-25-2005 90104 017 ***150.00

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P98000105072			
1. Entity Name U.S. INNOVATIONS, INC.			
Principal Place of Business 1400 WHEATFIELD DRIVE LAWRENCEVILLE, GA 30043		Mailing Address 1400 WHEATFIELD DRIVE LAWRENCEVILLE, GA 30043	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 58-2439084		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WHIBBS, SUZANNE N 421 NORTH PALAFOX STREET PENSACOLA, FL 32501		7. Name and Address of New Registered Agent Name: Suzanne N. Whibbs Street Address (P.O. Box Number is Not Acceptable) 100 E. Greenway Square City: Pensacola FL 32502	
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, the registered agent.			
SIGNATURE: 		DATE: _____	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent Signature required when registering)	
FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME CITY-ST-ZIP	PO 421 N. ASKIN DRIVE LAWRENCEVILLE, GA 30043 ☐ Delete	TITLE NAME CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST WHIBBS, SUZANNE N 421 NORTH PALAFOX STREET PENSACOLA, FL 32501 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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: 		DATE: _____	
Signature AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR		Daytime Phone: _____	

ATTACHMENT
LES KRAITZICK & ASSOCIATES
Accounting & Tax Services - Financial Advisors*

20065334

July 20, 2005

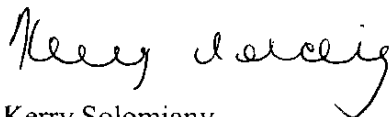
Florida Department of State
Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

RE: U.S. Innovations, Inc.
Document # P98000105072

Dear Sir or Madam:

We are the accountants for the above mentioned corporation and are writing to you on their behalf. My client failed to file his Corporate Annual Report as he did not receive the Annual Report Notice for 2005. This letter serves to request an abatement of the penalty charged to my client of \$400.00. I am enclosing a check in the amount of \$150.00 for the annual renewal.

Sincerely,



Kerry Solomiany