


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 17, 2006 8:00 am**  
**Secretary of State**

01-17-2006 90263 047 \*\*\*150.00

<b>DOCUMENT # V41724</b>	
1. Entity Name <b>INNOVATIVE SYSTEMS AND TECHNOLOGIES CORPORATION</b>	

Principal Place of Business <b>2345 ANVIL ST. N. ST. PETERSBURG, FL 33710 US</b>	Mailing Address <b>2345 ANVIL ST. N. ST. PETERSBURG, FL 33710 US</b>
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**40002754**

2. Principal Place of Business <b>2570 Coral Landings Blvd Suite # 300 Palm Harbor, FL 34684 USA</b>	3. Mailing Address <b>2570 Coral Landings Blvd Suite # 300 Palm Harbor, FL 34684 USA</b>
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01102006 Chg-P CR2E034 (11/05)

4. FEI Number <b>59-3128534</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent <b>SOKOL, STEVEN J 2345 ANVIL ST. N. ST. PETERSBURG, FL 33710</b>	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code
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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 registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KLEINER, MARTIN H. 2345 ANVIL ST N SAINT PETERSBURG, FL 33710 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P EMERICK, JAMES P. 2345 ANVIL ST. N. ST. PETERSBURG, FL 33710 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>2570 Coral Landings Blvd Suite #300 Palm Harbor, FL 34684</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WOLFINGTON, JAY R. 2345 ANVIL ST. N. ST. PETERSBURG, FL 33710 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SOKOL, STEVEN J 2345 ANVIL ST. N. ST. PETERSBURG, FL 33710 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>VP/SEC. 2570 Coral Landings Blvd Suite #300 Palm Harbor, FL 34684</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C HILLS, DURRELL 2345 ANVIL ST N SAINT PETERSBURG, FL 33710 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>2570 Coral Landings Blvd Suite #300 Palm Harbor, FL 34684</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>Board Director Dennis Whittaker 2570 Coral Landings Blvd Suite #300 Palm Harbor, FL 34684</b>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Steven J. Sokol STEVEN J. SOKOL CFO JAN 10, 2006  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Addition

ATTACHMENT

Title Board Director 40002754  
Name Parker Robinson  
Address 2570 Coral Landings Blvd  
Suite #300  
City: State- Zip Palm Harbor, FL 34684