

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 845389

**FILED  
Apr 22, 2015  
Secretary of State  
CC6647423566**

**Entity Name:** INNOVATIVE INTERFACES INCORPORATED

**Current Principal Place of Business:**

5850 SHELLMOUND WAY  
EMERYVILLE, CA 94608

**Current Mailing Address:**

5850 SHELLMOUND WAY  
EMERYVILLE, CA 94608 US

**FEI Number:** 94-2553274

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 US

*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

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            LAWSON, RICHARD  
Address        5850 SHELLMOUND WAY  
City-State-Zip: EMERYVILLE CA 94608

Title            SECRETARY, DIRECTOR  
Name            BARBER, PAUL  
Address        5850 SHELLMOUND WAY  
City-State-Zip: EMERYVILLE CA 94608

Title            TREASURER  
Name            JACKSON , CHRISTOPHER E  
Address        5850 SHELLMOUND WAY  
City-State-Zip: EMERYVILLE CA 94608

Title            CFO  
Name            CURRY , SANDRA L  
Address        5850 SHELLMOUND WAY  
City-State-Zip: EMERYVILLE CA 94608

*I hereby 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 all other like empowered.*

**SIGNATURE:** CHRISTOPHER E. JACKSON

**TREASURER**

**04/22/2015**

Electronic Signature of Signing Officer/Director Detail

Date