

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000000151

FILED
May 01, 2007
Secretary of State

Entity Name: INNOVATIVE SERVICE TECHNOLOGY MANAGEMENT SERVICES, INC.

Current Principal Place of Business:

934 GLENWOOD AVE.
SUITE 250
ATLANTA, GA 303161816

New Principal Place of Business:

Current Mailing Address:

934 GLENWOOD AVE.
SUITE 250
ATLANTA, GA 303161816

New Mailing Address:

FEI Number: 58-2303739 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD, SUITE 101
TALLAHASSEE, FL 323012960 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: PRES () Delete
Name: BLACKMAN, HAL
Address: 110 ALEXANDRIA CT
City-St-Zip: FAYETTEVILLE, GA 30214

Title: VP () Delete
Name: CARROLL, JOSEPH
Address: 2967 NESTLE CREEK DR.
City-St-Zip: MARIETTA, GA 30062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: BLACKMAN, HAL S
Address: 110 ALEXANDRIA CT
City-St-Zip: FAYETTEVILLE, GA 30214

Title: VP (X) Change () Addition
Name: CARROLL, JOSEPH K
Address: 2967 NESTLE CREEK DR.
City-St-Zip: MARIETTA, GA 30062

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: HAL S BLACKMAN

PRES

05/01/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date