## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000051989

AVENTURA, FL 33180

City-St-Zip:

Entity Name: INTEGRATED DOCUMENT SOLUTIONS INC.

FILED Jan 21, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
3511 W. COMMERCAIL BLVD. SUITE200 FORT LAUDERDALE, FL 33309				3511 W. COMMERCAIL BLVD. SUITE 100 FORT LAUDERDALE, FL 33309			
Current Mailing Address:				New Mailing Address:			
3511 W. COMMERCIAL BLVD SUITE 200 FORT LAUDERDALE, FL 33309				3511 W. COMMERCIAL BLVD SUITE 100 FORT LAUDERDALE, FL 33309			
FEI Number	: 45-0515740	FEI Number Applied For ( )	FEI Nur	nber Not App	licable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
BRONSTEIN, DINA B MRSS. 3511 W. COMMERCIAL BLVD. SUITE 200 FORT LAUDERDALE, FL 33309 US				BRONSTEIN, DINA B MRSS. 3511 W. COMMERCIAL BLVD. SUITE 100 FORT LAUDERDALE, FL 33309 US			
	e named entity s e of Florida.	submits this statement for the p	ourpose o	f changing i	ts registered o	office or registered agent, or both,	
SIGNATURE:				01/21/2005			
	Electron	ic Signature of Registered Age	ent			Date	
Election Ca	mpaign Financing	Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	DAGAN, YANIV 3511 W. COMM	Delete MR. IERCIAL BLVD., SUITE 200 DALE, FL 33309		Title: Name: Address: City-St-Zip:	DAGAN, YANIV 3511 W. COMM	) Change ()Addition 「MR. MERCIAL BLVD., SUITE 100 DALE, FL 33309	
Title: Name: Address: City-St-Zip:	BRONSTEIN, H	POINT DR., #2808		Title: Name: Address: City-St-Zip:	( )	) Change ()Addition	
Title: Name: Address: City-St-Zip:	BRONSTEIN, H	POINT DR., #2808		Title: Name: Address: City-St-Zip:		) Change ()Addition	
Title: Name: Address:	BRONSTEIN, H	Delete LLEL MR. POINT DR., #2808		Title: Name: Address:	( )	) Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

City-St-Zip:

SIGNATURE: YANIV DAGAN P 01/21/2005