

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000011206

**Entity Name:** INTEGRATED TOTAL SOLUTIONS, INC.

**Current Principal Place of Business:**

801 BRICKELL AVENUE  
SUITE 900  
MIAMI, FL 33131

**Current Mailing Address:**

20191 EAST COUNTRY CLUB DRIVE.  
2411  
AVENTURA, FL 33180 US

**FEI Number:** 48-1301872

**Certificate of Status Desired:** No

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

NICHOLS, ANDREW T  
801 BRICKELL AVENUE  
SUITE 900  
MIAMI, FL 33131 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 P  
Name NICHOLS, ANDREW  
Address 3661 BOUGAINVILLEA RD.  
City-State-Zip: COCONUT GROVE FL 33133

Title VP  
Name NICHOLS, SUZANNE B  
Address 20191 EAST COUNTRY CLUB DRIVE.  
2411  
City-State-Zip: AVENTURA FL 33180

*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:** ANDREW NICHOLS

**PRESIDENT**

**04/23/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date