

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000044745

**Entity Name:** INTERNATIONAL TRANSLATORS SERVICES INC.

**Current Principal Place of Business:**

12478 EAGLES CLAW LN.  
JACKSONVILLE, FL 32225

**Current Mailing Address:**

12478 EAGLES CLAW LN.  
JACKSONVILLE, FL 32225

**FEI Number:** 46-2847132

**Certificate of Status Desired:** Yes

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

QUIRCH, NOEMI  
12478 EAGLES CLAW LN.  
JACKSONVILLE, FL 32225 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            QUIRCH, NOEMI  
Address        12478 EAGLES CLAW LN.  
City-State-Zip: JACKSONVILLE FL 32225

Title            SEC.  
Name            QUIRCH, NOEMI  
Address        12478 EAGLES CLAW LN.  
City-State-Zip: JACKSONVILLE FL 32225

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:** NOEMI QUIRCH

**SECRETARY**

**02/17/2015**

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

\_\_\_\_\_  
Date