

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000572

FILED
Apr 21, 2011
Secretary of State

Entity Name: INTEGRATED SYSTEM DIAGNOSTICS, INC.

Current Principal Place of Business:

889 SHORE ROAD
POCASSET, MA 02559

New Principal Place of Business:

Current Mailing Address:

889 SHORE ROAD
POCASSET, MA 02559

New Mailing Address:

FEI Number: 04-3236627

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMMONS, MICHAEL J
505 EAST JACKSON STREET, STE. 107
STE. 107
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

SIMMONS, MICHAEL J
3609B E 10TH AVE
TAMPA, FL 33605 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

04/21/2011

Date

OFFICERS AND DIRECTORS:

Title: CEO
Name: MORIN, JOSEPH F
Address: 889 SHORE ROAD
City-St-Zip: POCASSET, MA 02559

Title: CTO
Name: BYRNES, PAUL D
Address: 1764 FRANKLIN CHASE
City-St-Zip: HENDERSON, NV 89012

Title: T
Name: SIMMONS, MICHAEL M
Address: 3609B EAST 10TH AVENUE
City-St-Zip: TAMPA, FL 33605

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: JOSEPH F. MORIN

CEO

04/21/2011

Electronic Signature of Signing Officer or Director

Date