

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 03, 2004 8:00 am**  
**Secretary of State**

05-03-2004 90691 008 \*\*\*158.75

**DOCUMENT # F04000000111**

1. Entity Name

INTEGRA RETAILING, INC.



Principal Place of Business

2930 HONOLULU AVE. #101  
LA CRESCENTA CA 91214

Mailing Address

PO BOX 497  
VERDUGO CITY CA 91046-0497

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

03-0402406

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required



MOORE

CR2E034 (11/03)

6. Name and Address of Current Registered Agent

MEDLEY, STAN  
631 CLEVELAND ST.  
CLEARWATER FL 33755

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PCD ☐ Delete  
NAME SANDMANN, RON  
STREET ADDRESS PO BOX 497  
CITY-ST-ZIP VERDUGO CITY CA 91046-0497

TITLE S ☒ Delete  
NAME DAINO, CHRIS  
STREET ADDRESS PO BOX 497  
CITY-ST-ZIP VERDUGO CITY CA 91046-0497

TITLE T ☐ Delete  
NAME METCALF, ELISABETH  
STREET ADDRESS PO BOX 497  
CITY-ST-ZIP VERDUGO CITY CA 91046-0497

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Secretary/Director ☒ Change ☒ Addition  
NAME MAIDA D. CANDLER  
STREET ADDRESS PO Box 497  
CITY-ST-ZIP Verdugo City, CA 91046-0497

TITLE TREASURER/Director ☒ Change ☐ Addition  
NAME Elisabeth Metcalf  
STREET ADDRESS (Same as listed)  
CITY-ST-ZIP

TITLE PRESIDENT/DIRECTOR ☐ Change ☒ Addition  
NAME William A. Cantle  
STREET ADDRESS PO Box 497  
CITY-ST-ZIP Verdugo City, CA 91046-0497

TITLE Director/Chairman of Board ☒ Change ☐ Addition  
NAME Ron Sandmann  
STREET ADDRESS (Same as listed)  
CITY-ST-ZIP

TITLE Vice President/Director ☐ Change ☒ Addition  
NAME Raj Oakley  
STREET ADDRESS PO Box 497  
CITY-ST-ZIP Verdugo City, CA 91046-0497

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Elisabeth Metcalf* ELISABETH METCALF, TREASURER, 4-30-04 541-7690 (818)  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #