2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004853

FILED Jan 14, 2009 Secretary of State

Entity Name: INTEGRATED ENGINEERING CONSULTANTS, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	KSIDE ROAD			
SUITE 29(CLEVELA	u .ND, OH 4412:	5		
Current N	Mailing Addres	ss:	New Mailing Address	s:
SUITE 290	CKSIDE ROAD 0 .ND, OH 4412!	5		
FEI Number	r: 42-1 554075	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)
Name and Address of Current Registered Agent:		Name and Address o	Name and Address of New Registered Agent:	
SILVA, JC	SPEH PILOT'S COVE	TEDDACE		
	UND, FL 3345			
HOBE SO	OUND, FL 3345	55 US	ourpose of changing its registered	d office or registered agent, or both,
HOBE SO The above in the Stat	OUND, FL 3348 e named entity e of Florida.	55 US	ourpose of changing its registered	d office or registered agent, or both,
HOBE SO The above in the Stat	e named entity e of Florida. RE:	55 US		d office or registered agent, or both, Date
HOBE SO The above in the Stat SIGNATU	e named entity e of Florida. RE: Electro	55 US submits this statement for the រុ		
HOBE SO The above in the Stat SIGNATU Election Ca	e named entity e of Florida. RE: Electro	submits this statement for the particles of Registered Agragature of Registered Agragature of Registered Agragature fund Contribution ().	ent	
HOBE SO The above in the Stat SIGNATU Election Ca	e named entity e of Florida. RE: Electrol mpaign Financin S AND DIREC	submits this statement for the particles of Registered Agric Signature of Registered Agric Trust Fund Contribution (). TORS: Delete DE ROAD #290	ent	Date

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

SIGNATURE: AJ MAZZA PT 01/14/2009