

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H72388

FILED
Mar 16, 2011
Secretary of State

Entity Name: INTEGRAL THEFT-PROOF VASE, INC.

Current Principal Place of Business:

1183 US HWY. #1, N.
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

1183 US HWY. #1, N.
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 59-2718567

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LETTER, EUGENE
1183 N U.S. HWY 1
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: LETTER, RAYMOND J
Address: 363 WESTCHESTER DRIVE
City-St-Zip: DELAND, FL

Title: VPD
Name: LETTER, GARY P
Address: 1183 N U.S. HWY 1
City-St-Zip: ORMOND BEACH, FL

Title: VPD
Name: LETTER, EUGENE P
Address: 1183 N. U.S. HWY 1
City-St-Zip: ORMOND BEACH, FL

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: EUGENE P. LETTER

VPD

03/16/2011

Electronic Signature of Signing Officer or Director

Date