FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Jan 31 1997 8:00am

Secretary of State

904-398-8129

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H76286

(4)

INTEGRATED INDUSTRIAL SERVICES, INC.

Principal Place	e of Business	Mailing Address				I HOURET BUIL IDDAG OLIKU HIEGU LUTIG OUIL OFORK DIAMA OTOLI OLOKI OLOKI OLOKI OLOKI OLOKI				
2634 NICHOLAS CIR W. JACKSONVILLE FL 32207-1755		2634 NICHOLAS CIR W. JACKSONVILLE FL 32207-4755								
						3. Date Incorporated or Qualified 09/13/1985		te of Last	•	
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number			Applied For	
21		26				· · · · · · · · · · · · · · · · · · ·			Not Applicable	
Suite, Apt.	#, CIC	Suite Apt. #. etc.				5. Certificate of Status Desired			Additional	
City & State	g	City & State	City & State			0. 5111 01 511			Required	
23		28				Election Campaign Financing Trust Fund Contribution			O May Be d to Fees	
Ζφ	Country	Zip	Cou	intry		This corporation has liability for it				
24	25 29 30						Florida Statutes Yes No			
	Name and Address of Current	Registered Agent				10. Name and Address of New Re	istered /	gent		
NEW	MAN, MICHAEL P.			81	Name					
2634	NICHOLAS CIRCLE WEST			82	Street Ac	ldress (P.O. Box Number is Not Acceptab	le)	-		
JAX	FL 32207		<u> </u>							
				83						
				84	City		FL	85 Zq	p Code	
11. Pursuant	to the provisions of Sections 607,0502	and 607.1508, Florida Statu	tes, the a	boye	-named co	prporation submits this statement for the p		changing	its registered	
office or r agent. I a	égistered agent, or both, in the Stale c in familiar with, and accept the obliga	of Florida. Such change was tions of, Section 607.0505, Fi	authorize Iorida Sta	d by tutes	the corpo i.	orporation submits this statement for the p ration's board of directors. I hereby accep	t the appo	pintment a	is registered	
SIGNATURE										
	Signature type a or principlinative or regularizations			d Age	nt signature rei	quired when reinstating)	DATE			
12.	OFFICERS AND					ADDITIONS/CHANGES TO OFFIC	ERS AND	_		
TILLE	VT Newman, Judith		1.1 T					Change	a Addition	
NAME STREET ADDRESS	2634 NICHOLAS CIRCLE W		1.2 NAME 1.3 STREET ADDI		ADDDCCC					
CHY-SI-ZIP	JAX FL			incei ITY-S						
TITLE	DP	DELETE	217	*****	1-217		·	Change	e Addition	
NAM?	NEWMAN, MICHAEL		2.2 N							
STREET ADORESS	2634 NICHOLAS CIRCLE W.			2.3 STREET ADDRESS						
CHY-ST-ZIP	JAX FL				T-ZIP					
TITLE		☐ DELETE	3.1 T	TLE				☐ Change	e Addition	
NAME:			3.2 N	AME						
STREET ADDRESS			3.3 S	TREET	ADDRESS					
COLY - ST - ZIP					IT-ZIP					
Tille		L DELETE	4.1 7					Change	e Addition	
NAME:			4.21		[
STREET ADDRESS					ADDRESS					
CHY-S1-74P		DELETE		IIY~S	T-ZIP			Change	Addition	
TIFLE NAME			5.1 To 5.2 N					L Change	e L Addition	
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP					T-ZIP					
TILLE		DELETE	6.1 T		1 - 20			☐ Change	e Addition	
NAM:			6.2 N							
STREET ADDRESS					ADDRESS					
			I							

14. I do 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 annual report or supplemental annual 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 true elempowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or a participated with an address.