

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J67649

Entity Name: INTEGRITY SIGNS, INC.

FILED
Sep 07, 2005
Secretary of State

Current Principal Place of Business:

6125 ANNO AVE.
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

6125 ANNO AVE.
ORLANDO, FL 32809

New Mailing Address:

FEI Number: 59-2810421

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUNNINGHAM, JAMES R., ESQ.
1309 E. ROBINSON ST.
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

GABRIEL, MARK
6125 ANNO AVE
ORLANDO, FL 32809 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: MARK GABRIEL

09/07/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KATYNSKI, KENNETH
Address: 1506 S. CHICKASAW TR
City-St-Zip: ORLANDO, FL 32825

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: GABRIEL, JOSEPH
Address: 13 SEARS ROAD
City-St-Zip: BREWSTER, MA 02631

Title: DVPS () Change (X) Addition
Name: GABRIEL, MARK
Address: 8320 LE MESA ST
City-St-Zip: ORLANDO, FL 32827

Title: T () Change (X) Addition
Name: GABRIEL, MARK
Address: 8320 LE MESA ST
City-St-Zip: ORLANDO, FL 32827

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOSEPH GABRIEL

DP

09/07/2005

Electronic Signature of Signing Officer or Director

Date