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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name _28235

(4)

INTEGRITY DESIGNS, INC.

FILED Apr 16 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				C and tied to by 11 Sec. (Arie 11 Sec. trink tien) diet frien.	01451 A1015 B1811 B1811 A1811 INS	
6215 FINSBURY CT PALM BEACH GARDENS FL 33418 US		6215 FINSBURY CT Palm Beach Gardens US	PALM BEACH GARDENS FL 33418		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
		,			11/06/1989	
9 Principal I	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21			26		65-0152785	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	28		Trust Fund Contribution	Added to Fees
Zip	Country Zip		Countr	У	8. This corporation owes or has paid the	_ ' _ "
24	25	29	30		Personal Property Tax due June 30.	Yes No
	g. Name and Address of Curre	nt Registered Agent		1 N	10. Name and Address of New Register	ed Agent
KNIZNIK, LOIS			8	Name		
	271 Brandon St		82	2 Street Addr	ress (P.O. Box Number is Not Acceptable)	
P/	ALM BEACH GARDENS FL 3341	8	83	3		
			84	4 City		85 Zip Code
				1		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Signature, typod or profiled name of registered agent and total if applicable (NOTE Registered Agent signature required when reinstating) DATE						
12,	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS /	AND DIRECTORS IN 12
TITLE	D DELETE		1.1 TITLE			Change Addition
NAME	KNIZNIK, LOIS		1.2 NAME	:		
STREET ADDRESS			1.3 STREE	et address		
CITY-ST-ZIP	PALM BCH GARDENS FL		1.4 CITY-			
TITLE		☐ DELE te	2.1 TITLE			Change Addition
HAME			2 2 NAME			
STREET ADDRESS			2.3 STREE	et address		
CITY-ST-ZIP			2 4 CHTY			
TITLE	1	☐ DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP	Porter		3.4. CITY-ST-ZIP			Change Addition
TITLE	☐ DELETE		4.1 TITLE			The Charles The Controls
NAME			4. 2 NAM			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY- 5.1 TITLE			Change Addition
TITLE				1		الماليون الماليون الماليون الماليون
NAME OTREET ADDRESS			5.2 NAME	ET ADDRESS		
STREET ADDRESS						
CITY-ST-ZIP TITLE	<u> </u>	DELETE	5.4 CITY- 6.1 TITLE			Change Addition
		- VICEIL	6.2 NAME			
NAME OTDEET LODDEGG				ET ADDRESS		
STREET ADDRESS				1		
CITY-ST-ZIP	postific that the information supplied	with this filing door not qualify f	6.4 CITY		Section 119 07(3)(i) Florida Statutes I furthe	r certify that the information

Indicated on this annual report or supplied with this initing does not qualify for me exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this annual report or suppliemental 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 this 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 12 or Block 13 if changed, or on an attachment with an address.