

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000005479

FILED
Apr 08, 2010
Secretary of State

Entity Name: INTEGRITY MEDICAL SERVICES INC.

Current Principal Place of Business:

18441 NW 2 AVE
SUITE 215
MIAMI, FL 33169

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 693996
MIAMI, FL 33269

New Mailing Address:

FEI Number: 65-0980730

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAYOL, MARCOS A
18441 NW 2 AVE
SUITE 215
MIAMI, FL 33169 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES
Name: GAYOL, MARCOS A
Address: 18441 NW 2 AVE #215
City-St-Zip: MIAMI, FL 33169 US

Title: VICE
Name: GAYOL, ENRIQUE O
Address: 18441 NW 2 AVE #215
City-St-Zip: MIAMI, FL 33169 US

Title: TREA
Name: GAYOL, MARCOS A
Address: 18441 NW 2 AVE #215
City-St-Zip: MIAMI, FL 33169

Title: SEC
Name: GAYOL, MARCOS A
Address: 18441 NW 2 AVE #215
City-St-Zip: MIAMI, FL 33169

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: MARCOS A GAYOL

PRES

04/08/2010

Electronic Signature of Signing Officer or Director

Date