

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000117737

FILED
Mar 24, 2009
Secretary of State

Entity Name: INTEGRATED SERVICE SOLUTIONS CORP.

Current Principal Place of Business:

355 ALHAMBRA CIRCLE
SUITE 801
MIAMI, FL 33134

New Principal Place of Business:

355 ALHAMBRA CIRCLE
SUITE 801
MIAMI, FL 33134 US

Current Mailing Address:

355 ALHAMBRA CIRCLE
SUITE 801
MIAMI, FL 33134

New Mailing Address:

FEI Number: 65-1113542 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REGISTERED AGENT CORPORATE SERVICES INC.
355 ALHAMBRA CIRCLE, SUITE 801
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

REGISTERED AGENT CORPORATE SERVICES INC.
355 ALHAMBRA CIRCLE
SUITE 801
CORAL GABLES, FL 33134 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: BETSY PARENTI, ASSIST. SECRETARY
Electronic Signature of Registered Agent

03/24/2009

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: VALDES-FAULI, GONZALO F
Address: 1111 CRANDON BLVD. APT. B 100
City-St-Zip: KEY BISCAYNE, FL 33149

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: VALDES-FAULI, GONZALO F
Address: 1111 CRANDON BLVD., APT. B -1008
City-St-Zip: KEY BISCAYNE, FL 33149 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: GONZALO VALDES-FAULI
Electronic Signature of Signing Officer or Director

D

03/24/2009

Date