

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 28, 2004 8:00 am
Secretary of State

06-28-2004 90009 012 ***158.75

DOCUMENT # P02000048126

1. Entity Name
INTEGRATED TECHNOLOGY AND SOFTWARE, INC.



Principal Place of Business
**750 GARDENIA DR
ROYAL PALM BEACH, FL 33411**

Mailing Address
**750 GARDENIA DR
ROYAL PALM BEACH, FL 33411**

54058986



2. Principal Place of Business
**18950 NW 27 AVE
Suite, Apt. #, etc.
204**

3. Mailing Address
**18950 NW 27 AVE
Suite, Apt. #, etc.
204**

06252004 Chg-P CR2E034 (10/03)

City & State
MIAMI, FLORIDA
Zip
33056
Country
USA

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MIAMI, FLORIDA
Zip
33056
Country
USA

4. FEI Number
03-0440380
Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**PETERKIN, LAREN
750 GARDENIA DR
ROYAL PALM BEACH, FL 33411**

7. Name and Address of New Registered Agent

Name **LAREN PETERKIN, LAREN**
Street Address (P.O. Box Number is Not Acceptable)
**18950 NW 27 AVE
APT. 204**
City **MIAMI** FL Zip Code **33056**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **DSAP**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

06-25-2004

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DSAP PETERKIN, LAREN 750 GARDENIA DR ROYAL PALM BEACH, FL 33411	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP PETERKIN, DUANE 750 GARDENIA DR ROYAL PALM BEACH, FL 33411	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MORANT, KEISHA 750 GARDENIA DR ROYAL PALM BEACH, FL 33411	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NOTEMAN, TAMIKO 750 GARDENIA DR ROYAL PALM BEACH, FL 33411	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, S, A, P PETERKIN, LAREN 18950 NW 27 AVE MIAMI, FL 33056	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, S, VP PETERKIN, DUANE 18950 NW 27 AVE MIAMI, FL 33056	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORANT, KEISHA 18950 NW 27 AVE MIAMI, FL 33056	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, T NOTEMAN, TAMIKO 18950 NW 27 AVE MIAMI, FL 33056	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I 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 report or supplemental 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **LAREN PETERKIN**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06-25-2004

DATE

305-474-7841

DAYTIME PHONE #