


FILED
May 12, 2005 8:00 am
Secretary of State

04-13-2005 90032 043 ***158.75

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

| | |
|---|---|
| DOCUMENT # P03000063995 1. Entity Name INTEGRITY MARKETING GROUP, INC. |  |
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| Principal Place of Business 1532 ORANGE STREET CLEARWATER, FL 33756 | Mailing Address 1532 ORANGE STREET CLEARWATER, FL 33756 |
|---|---|

66016801



03232005 No Chg-P CR2E034 (10/03)

| | |
|---|-----------------------------------|
| 4. FBI Number 58-2673395 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

DO NOT WRITE IN THIS SPACE

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|---|
| 6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 |
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**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PSTD BURNS, DAVID A 1532 ORANGE STREET CLEARWATER, FL 33756 |
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: DAVID BURNS 5-5-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #