

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000146477

FILED
Oct 04, 2005
Secretary of State

Entity Name: INTEGRITY INSTALLATION SERVICES INC.

Current Principal Place of Business:

24322 BRANCHWOOD COURT
LUTZ, FL 33559

New Principal Place of Business:

24322 BRANCHWOOD COURT
LUTZ, FL 33559 US

Current Mailing Address:

24322 BRANCHWOOD COURT
LUTZ, FL 33559

New Mailing Address:

24322 BRANCHWOOD COURT
LUTZ, FL 33559 US

FEI Number: 68-0574631

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PEREZ, RALPH
10921 AIRVIEW DRIVE
TAMPA, FL 33625 US

Name and Address of New Registered Agent:

VALDES, DIANE
24322 BRANCHWOOD CT
LUTZ, FL 33559 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: DIANE VALDES

10/04/2005

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: VALDES, DIANE
Address: 24322 BRANCHWOOD COURT
City-St-Zip: LUTZ, FL 33559

Title: P () Delete
Name: VALDES, MANUEL
Address: 24322 BRANCHWOOD COURT
City-St-Zip: LUTZ, FL 33559

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: VALDES, DIANE TD
Address: 24322 BRANCHWOOD COURT
City-St-Zip: LUTZ, FL 33559 US

Title: P (X) Change () Addition
Name: VALDES, MANUEL P
Address: 24322 BRANCHWOOD COURT
City-St-Zip: LUTZ, FL 33559 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MANUEL VALDES

P

10/04/2005

Electronic Signature of Signing Officer or Director

Date