## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000001749

Entity Name: INTEGRATUS TECHNOLOGIES, INC.

FILED May 02, 2008 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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2332 GALIANO ST 521 SAN LORENZO AVE

CORAL GABLES, FL 33134 US CORAL GABLES, FL 33146 US

Current Mailing Address: New Mailing Address:

2332 GALIANO ST 521 SAN LORENZO AVE

CORAL GABLES, FL 33134 US CORAL GABLES, FL 33146 US

FEI Number: 20-0555403 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LOUSSINIAN, CYNTHIA 521 SAN LORENZO AVE CORAL GABLES, FL 33146 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:

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:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D () Delete Title: P/D (X) Change () Addition
Name: RAMIREZ, EMMANUEL
Address: 2332 GALIANO ST Address: 521 SAN LORENZO AVE

 Address:
 2332 GALIANO ST
 Address:
 521 SAN LORENZO AVE

 City-St-Zip:
 CORAL GABLES, FL 33134
 City-St-Zip:
 CORAL GABLES, FL 33146

Title: V ( ) Delete Title: V (X) Change ( ) Addition Name: LOUSSINIAN, CYNTHIA Name: LOUSSINIAN, CYNTHIA

Address: 2332 GALIANO ST Address: 521 SAN LORENZO AVE.
City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33146

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: CYNTHIA LOUSSINIAN VP 05/02/2008