

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000070202

FILED
Apr 27, 2005
Secretary of State

Entity Name: INTEGRATED CONCEPTS OF TAMPA, INC.

Current Principal Place of Business:

9105 TUDOR DRIVE
202
TAMPA, FL 33615 US

New Principal Place of Business:

Current Mailing Address:

P.O BOX 262694
TAMPA, FL 33685 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHNEIDER, BRYAN
9105 TUDOR DRIVE
202
TAMPA, FL 33615 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCHNEIDER, BRYAN
Address: P.O. BOX 262694
City-St-Zip: TAMPA, FL 33685 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: SCHNEIDER, MICHELLE
Address: P.O. BOX 260455
City-St-Zip: TAMPA, FL 33685 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: BRYAN SCHNEIDER

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04/27/2005

Electronic Signature of Signing Officer or Director

_____ Date