

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000098395

FILED
May 03, 2007
Secretary of State

Entity Name: INTEGRATED COMMERCIAL ENTERPRISES INC.

Current Principal Place of Business:

111 BUCK ROAD
UNIT 500 SUITE 3
HUNTINGDON VALLEY, PA 19006 US

Current Mailing Address:

111 BUCK ROAD
UNIT 500 SUITE 3
HUNTINGDON VALLEY, PA 19006 US

New Principal Place of Business:

1707 LANGHORNE NEWTOWN RD
UNIT 5
LANGHORNE, PA 19047 US

New Mailing Address:

1707 LANGHORNE NEWTOWN RD
UNIT 5
LANGHORNE, PA 19047 US

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

Name and Address of Current Registered Agent:

SHUSMAN, LEONID
400 CAPITAL CIR. SE
STE 18
TALLAHASSEE, FL 32301 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

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: P () Delete
Name: SALTSOVA, LARISA
Address: 111 BUCK ROAD UNIT 500 SUITE 3
City-St-Zip: HUNTINGDON VALLEY, PA 19006 US

Title: VP (X) Delete
Name: MALOZOVSKY, IRENE
Address: 111 BUCK ROAD UNIT 500 SUITE 3
City-St-Zip: HUNTINGDON VALLEY, PA 19006 US

Title: VP () Delete
Name: SHUSMAN, LEONID
Address: 111 BUCK ROAD UNIT 500 SUITE 3
City-St-Zip: HUNTINGDON VALLEY, PA 19006 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SALTSOVA, LARISA
Address: 1707 LANGHORNE NEWTOWN RD UNIT 5
City-St-Zip: LANGHORNE, PA 19047 US

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

Title: VP (X) Change () Addition
Name: SHUSMAN, LEONID
Address: 1707 LANGHORNE NEWTOWN RD.
City-St-Zip: LANGHORNE, PA 19047 US

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: LEONID SHUSMAN

VP

05/03/2007

Electronic Signature of Signing Officer or Director

_____ Date