

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000149786

FILED
Feb 14, 2009
Secretary of State

Entity Name: INTEGRATED MECHANICAL SERVICES, INC.

Current Principal Place of Business:

2751 NE 9TH STREET
POMPANO BEACH, FL 33062 US

New Principal Place of Business:

1850 ELLER DRIVE
SUITE 200
FORT LAUDERDALE, FL 33316 US

Current Mailing Address:

2751 NE 9TH STREET
POMPANO BEACH, FL 33062 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

SCHILLINGER, LEE H
4601 SHERIDAN STREET
SUITE 202
HOLLYWOOD, FL 33021 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, D () Delete
Name: TOSCANO, JOHN R
Address: 2751 NE 9 STREET
City-St-Zip: POMPANO BEACH, FL 33062

Title: VP, () Delete
Name: TOSCANO, MARILYN
Address: 2751 NE 9 STREET
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: JOHN R. TOSCANO

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02/14/2009

Electronic Signature of Signing Officer or Director

Date