

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000098823

**FILED**  
**Apr 23, 2012**  
**Secretary of State**

**Entity Name:** INTEGRATED RX SERVICES, INC.

**Current Principal Place of Business:**

1155 CHARLES ST SUITE 165  
LONGWOOD, FL 32750

**New Principal Place of Business:**

210 N WESTMONTE DR SUITE 1002  
ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:**

1155 CHARLES ST SUITE 165  
LONGWOOD, FL 32750

**New Mailing Address:**

1759 REDWOOD GROVE TERRACE  
LAKE MARY, FL 32746

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JONES, ROBERT  
1155 CHARLES ST SUITE 165  
LONGWOOD, FL 32750 US

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

JONES, ROBERT  
1759 REDWOOD GROVE TERRACE  
LAKE MARY, FL 32746 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: ROBERT JONES

04/23/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: JONES, ROBERT  
Address: 1759 REDWOOD GROVE TERR  
City-St-Zip: LAKE MARY, FL 32746

Title: P  
Name: HAGHOU, ROBERT  
Address: 210 N WESTMONTE DR SUITE 1002  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

I hereby 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 all other like empowered.

SIGNATURE: ROBERT JONES

PRES

04/23/2012

Electronic Signature of Signing Officer or Director

Date