2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11153

Entity Name: INDUSTRIAL SYSTEMS ASSOCIATES, INC.

FILED Mar 02, 2009 Secretary of State

	incipal Place o		New Principal Place	New Principal Place of Business:	
BRISTOL, PA 19007					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
360 N CRESCENT DR SOUTH BLDG BEVERLY HILLS, CA 90210					
FEI Number:	23-1737774	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:					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:					
		c Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PCEO () I BOWER, HAYWO 1414 RADCLIFF BRISTOL, PA 19	E ST STE 300	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	KALAWSKI, EVA	IT DR SOUTH BLDG	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	JOUBRAN, ROBI	IT DR SOUTH BLDG	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP ()[HYCZKO, VICTO 1414 RADCLIFFI BRISTOL, PA 19	E ST STE 300	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SIGLER, MARY	IT DR SOUTH BLDG	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	WARD, SALLY A	IT DR SOUTH BLDG	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: SALLY A. WARD AS 03/02/2009