

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 165.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morinam  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 21 1997 8:00am  
Secretary of State

DOCUMENT # P11281 (3)

Corporation Name

INTERNATIONAL TOTAL SERVICES, INC.

Principal Place of Business

5005 ROCKSIDE RD  
CLEVELAND OH 44131

Mailing Address

5005 ROCKSIDE RD  
CLEVELAND OH 44131

Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TOMMIE J. HANNAH  
TAMPA AIRPORT MARRIOTT  
STE. B-16  
TAMPA FL 33607

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the address

(NOTE: Registered Agent signature required when reinstating)

DATE

2. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME  
2. ADDRESS  
3. CITY-STATE-ZIP  
CEO  
WEITZEL, ROBERT  
5005 ROCKSIDE RD  
CLEVELAND OH

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY-STATE-ZIP  
Change Addition

1. NAME  
2. ADDRESS  
3. CITY-STATE-ZIP  
C  
RITTER, JEFFREY  
5005 ROCKSIDE ROAD  
CLEVELAND OH

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY-STATE-ZIP  
Change Addition

1. NAME  
2. ADDRESS  
3. CITY-STATE-ZIP  
D  
STARKE, RICHARD  
5005 ROCKSIDE RD  
CLEVELAND OH

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY-STATE-ZIP  
Change Addition

1. NAME  
2. ADDRESS  
3. CITY-STATE-ZIP  
S  
WEITZEL, JEANETTE  
5005 ROCKSIDE RD  
CLEVELAND OH

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY-STATE-ZIP  
Change Addition

1. NAME  
2. ADDRESS  
3. CITY-STATE-ZIP

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY-STATE-ZIP  
Change Addition

1. NAME  
2. ADDRESS  
3. CITY-STATE-ZIP

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY-STATE-ZIP  
Change Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E034 (12/95)