FILE NOW: FILING FEE AFTER MAY 1ST IS \$ 50.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMEN

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P11281

INTERNATIONAL TOTAL SERVICES, INC.

(3)

FILED Feb 06 1998 8:00am Secretary of State



Del	Indiana Disease of Disease					
Principal Place of Business Mailing Address						
5005 ROCKSIDE RD 5005 ROCKSIDE F CLEVELAND OH 44131 CLEVELAND OH 4						
American All All Al		SECTEDING OF THE	OLLICENIU OII TIIVI		DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					08/05/1986	
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number Applied For	
21		26			34-1264201 Not Applicable	
Suite, Apt. #, etc.		<u> -</u>	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional	
22	City & State		City & State		Fee Required	
23	City & State	} ₁ *	}		6. Election Campaign Financing \$5.00 May Be	
	Zip Countr	28	Country		Trust Fund Contribution	
24	25	29	30	,	8. This corporation owes or has paid the current year Intangiblo Personal Property Tax due June 30. Yes No	
= -1		ess of Current Registered Agent	1901		10. Name and Address of New Registered Agent	
TOMMIE J. HANNAH				Name		
	TAMPA AIRPORT MARR	RIOTT	8	Ctron	et Address (P.O. Box Number is Not Acceptable)	
	STE. B-16		0.	511001	Address (P.O. Box Number is Not Acceptable)	
	TAMPA FL 33607		8	3		
			8			
			0	City	FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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.						
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutos.						
SIGNATURE TOMMIE J. ITANNAH Signature, tyred on printed name of registered agent and tale diagraphicable (NOT) Registered Agent signature required when roinstalling) DATE						
12.		c of registered agent and title if applicable (NO DEFICERS AND DIRECTORS		yont signatur	are required when roinstating) DATE	
TITLI		DELETE	13. 1.1 HTLF		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	
NAM		WEITZEL DODEDT			Change L. Addition	
	EET ADDRESS 5005 ROCKSIDE I		1.2 NAM6	T ADDRESS		
	-ST-ZIP CLEVELAND OH		1.4 C(1) Y		[]	
TITLE		DELETE	2.1 TULE		Change Addition	
NAM			2.2 NAME			
STRE	ET ADDRESS 5005 ROCKSIDE F		2 3 STREE	T ADDRESS		
CITY	-ST-ZIP CLEVELAND OH 4	l4131	2. 4 CHY-	\$1 - ZIP		
TITU		DECETE.	3.1 THEE		☐ Change ☐ Addition	
NAM			3.2 NAME			
STRE	ET ADDRESS 5005 ROCKSIDE F	RD	3 3 STREE	I ADDRESS		
CITY-ST-ZIP CLEVELAND OH			3 4. C(1) Y - S1 - Z(P			
TITLE			4 1 TATLE		President Change Addition Tames Singer Soos Rockside Rd. # 1200	
NAM			4. 2 NAME		James Singel	
	ET ADDRESS		ŀ	T ADDRESS	Soos Rockside Rd. #1200	
CITY-ST-ZIP TITLE		DECETE	4.4 CITY - ST - 7IP		11(VU(4)W VH 44/31-0/80	
NAM		i vitit	5.1 TITLE		Change Addition	
	ET ADORESS		5.2 NAME	T ANDROLOG		
	-ST-ZIP		•	I ADDRESS	1	
TITLE		DELETE	54 C/TY-	51 · ZII'	☐ Change ☐ Addition	
NAME	1		6.2 NAME		T Outside Manifold	
	ET ADDRESS			I ADDRESS]	
	-ST-ZIP		6.4 City-			
					-1	

Thereby certify that the information supplied with this filing does fol qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental another free 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 if truster empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or Block 13