

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90176 049 ***150.00

DOCUMENT # P93000039617

1. Corporation Name
INTEGRATED, INC.

Principal Place of Business
7906 LOST COVE CT.
ORLANDO FL 32819

Mailing Address
7906 LOST COVE CT.
ORLANDO FL 32819

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/04/1993

4. FEI Number

59-3190607

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

AUSTIN, SHERRY L
7906 LOST COVE COURT
ORLANDO FL 32819

10. Name and Address of New Registered Agent

81 Name Sherry L. Austin

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

853 Tarawitt DR.

83

84 City

Longboat Key, FL

85 Zip Code

34228

11. 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

Sherry L. Austin

(NOTE: Registered Agent signature required when reinstating)

5-11-99

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME AUSTIN, ROBERT
STREET ADDRESS 7906 LOST COVE COURT
CITY-ST-ZIP ORLANDO FL

DELETE

TITLE VP
NAME AUSTIN, SHERRY L
STREET ADDRESS 7906 LOST COVE COURT
CITY-ST-ZIP ORLANDO FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT
1.2 NAME ROBERT, AUSTIN
1.3 STREET ADDRESS 853 Tarawitt
1.4 CITY-ST-ZIP Longboat Key, FL 34228

Change Addition

2.1 TITLE VP
2.2 NAME Sherry L. Austin
2.3 STREET ADDRESS 853 Tarawitt
2.4 CITY-ST-ZIP Longboat Key, FL 34228

Change Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

14. I hereby certify that the information supplied with this filing does not 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 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, with all other like empowered.

SIGNATURE:

Sherry L. Austin

5-11-99

Date

941-387-7564

Daytime Phone #

CR2E034 (1/98)