

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

**FILED**

**May 06 1998 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



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

**DOCUMENT # P94000051656 (4)**  
1. Corporation Name  
**INTEGRATED TECHNOLOGIES OF SOUTHWEST FLORIDA, INC.**



Principal Place of Business: 4718 SW 12TH PL, SUITE 202, CAPE CORAL FL 33914 US  
Mailing Address: 4718 SW 12TH PLACE, SUIT 202, CAPE CORAL FL 33914 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
21 3800 Fowler  
Suite, Apt. #, etc.  
22 Bldg. #1, Unit #1  
City & State  
23 Fort Myers, FL  
Zip Country  
24 33901 25 USA

2a. Mailing Address  
26 1754 Sandy Circle  
Suite, Apt. #, etc.  
27  
City & State  
28 Cape Coral, FL  
Zip Country  
29 33904 30 USA

3. Date Incorporated or Qualified  
**07/13/1994**

4. FEI Number  
**65-0509512**

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 or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent  
**RATLIFF, ROBERT  
2340 PERIWINKLE WAY  
J-3  
SANIBEL FL 33957**

10. Name and Address of New Registered Agent  
81 Name  
**Christopher J. Duca**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**1754 Sandy Circle**  
83  
84 City  
**Cape Coral** 85 Zip Code  
**FL 33904**

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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 *Christopher J. Duca* **Christopher J. Duca** 4/22/98  
Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PSTD	<input type="checkbox"/> DELETE
NAME	DUCA, CHRIS J	
STREET ADDRESS	4718 SW 12TH PLACE, SUIT3 202	
CITY-ST-ZIP	CAPE CORAL FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	DUCA, L SUSIE	
STREET ADDRESS	4718 SW 12TH PLACE, SUITE 202	
CITY-ST-ZIP	CAPE CORAL FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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.

SIGNATURE *Christopher J. Duca* **Christopher J. Duca** 4/22/98 (941) 275-4888  
President

CP2E034 (10/97)