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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 06 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1, Corporation Name P94000051656 (4)

	INTEGR. C.	ATED TECHNOLOGI	ies of Southwest Florida	A, IN		
Principal Place of Business Mailing Address						IIDI ISOOO OIOOI EALIO OIM ISOO
4718 SW 12TH PL SUITE 202 CAPE CORAL FL 33914 US			4718 SW 12TH PLACE SUIT 202 CAPE CORAL FL 33914 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
_	Dringlant Di	ace of Business	2a. Mailing Address		07/13/1994 4. FEI Number	Applied For
2. 21			l-1	Circlo	"	Not Applicable
21	Suite, Apt. i	Fowler	26 1754 Sandy Suite, Apt #, etc.	CIICIE	65-0509512	\$8.75 Additional
22		#1, Unit #1	27		5. Certificate of Status Desired	Fee Required
22	City & State	▕▜▗▙▗▘▕▘▍▍▙▐▗▗▜▗▙ ▗▗▗ Э	City & State		6. Election Campaign Financing	\$5.00 May Be
23	Fort N		28 Cape Coral,	FL	Trust Fund Contribution	Added to Fees
	Zip	Country	Zip	Country	8. This corporation owes or has paid the d	current year Intangible
24	3390			30 USA	Personal Property Tax due June 30.	Yes No
		9. Name and Address	of Current Registered Agent		10. Name and Address of New Registers	d Agent
	234 J-3 SAN	ilipp, robert 0 periwinkle way Nibel FL 33957	7.7 <u> </u>	82 Street Addr 1754 (topher J. Duca ess (P.O. Box Number is Not Acceptable) Sandy Circle	85 Zip Code
			4/	Cape (Coral F	<u> </u>
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 register of office or registered eigent or both in the State of Florida Statutes, the above-named 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 familier with, and occopt the obligations of Section 607.0505, Florida Statutes.						
SI	INAIIIRE			Christo Registered Agent signature requir	pher J. Duca 4/2	22/98
		Signature, typied or plinted name of	CERS AND DIRECTORS		ed wher: reinstaling) LIATE	
12		PSTD	DELETE DELETE	13. 11 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
	ME	DUCA, CHRIS J		12 NAME		
	REET ADDRESS	4718 SW 12TH PLAC	E CHITA 202	1.3 STREET ADDRESS		
		CAPE CORAL FL	E, 30113 202	14 CITY-ST-ZIP		
TIT	TY-ST-ZIP	S	DELETE	21 TITLE		Change Addition
	ME	DUCA, L SUSIE		22 NAME		_ • _
	REET ADDRESS	4718 SW 12TH PLAC	E SHITE 202	2.3 STREET ADDRESS		
-		CAPE CORAL FL	C, SOIL 202	2. 4 City-St-ZiP		
TIT	Y-ST-ZIP	ON E COUNT I	DELETE	3.1 TITLE		Change Addition
	ME			3.2 NAME		
	REET ADORESS			3.3 STREET ADDRESS		.ه.,
_	ry-ST-ZIP			3.4. CITY-ST-ZIP		
TIT			DELETE	4.1 TITLE		Change Addition
NA	ME			4. 2 NAME		
	REET ADDRESS			4.3 STREET ADDRESS		
	TY-ST-ZIP			4.4 CITY-ST-ZIP		
	LE		DELETE	5.1 TITLE		Change Addition
	ME			5.2 NAME		
ST	REET ADDRESS			5.3 STREET ADDRESS		
	TY-ST-ZIP			5.4 CITY-ST-ZIP		
	LE		☐ DELETE	6.1 TITLE		Change Addition
NA	ME		<i></i>	6.2 NAME		
ST	REET ADDRESS			6.3 STREET ADDRESS		-
	TY-ST-ZIP			6.4 CITY - ST - ZIP		

14. Hereby certify that the information supplied with this filing Goes, lot 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 coport if 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 facciver 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, at our my attachment with an address.