


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

FILED  
Apr 26, 1999 8:00 am  
Secretary of State

04-26-1999 90239 019 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000057798 1. Corporation Name INTEGRATED TECHNOLOGY SYSTEMS, INC.			
Principal Place of Business 890 SOUTH DIXIE HIGHWAY CORAL GABLES FL 33146		Mailing Address 890 SOUTH DIXIE HIGHWAY CORAL GABLES FL 33146	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
9. Name and Address of Current Registered Agent SCHREIBER, GERHARDT A ESQ. 890 SOUTH DIXIE HIGHWAY CORAL GABLES FL 33146		10. Name and Address of New Registered Agent 81 Name: GERHARDT A. SCHREIBER 82 Street Address (P.O. Box not acceptable): 2222 Ponce de Leon Blvd. 83 City: Coral Gables, Florida 33134 FL 84 Zip Code: 33134	
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, am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOT Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	
P AVINO, JOAQUIN G 5960 SW 57TH AVE MIAMI FL		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
VP ALVAREZ, JULIO E 5960 SW 57TH AVE MIAMI FL		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
VP WOLFBERG, DAVID A 5960 SW 57TH AVE MIAMI FL		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
VP WOLFBERG, DAVID A 5960 SW 57TH AVE MIAMI FL		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
VP WOLFBERG, DAVID A 5960 SW 57TH AVE MIAMI FL		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/08/1996	
4. FEI Number 65-0725585	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

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:   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-22-99 (305) 666-5474  
Date Daytime Phone #

CR2E034 (11/98)