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

DOCUMENT # **P97000007595**

1. Corporation Name

INTEGRATED SOFTWARE TECHNOLOGIES, INC.

Principal Place of Business

Mailing Address

4040 MALADAD LAKES DDIVE

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90117 044 ***150.00



PALM BAY FL 3		PALM BAY FL 32905						
					DO NOT WRITE IN THIS S	PACE		
					Date Incorporated or Qualifed		1	
					01/21/1997			
2. Principal Pl	ace of Business	2a. Mailing Address	. Bec	y La		App	olied For	
21 4590	-1 Roll lake Tout	26 4590-1	∌ . 7	ا من	59-3427512	Not	Applicable	
Suite, Apt.		Suite; Apt. #, etc.		<u> </u>		-\$8.75 A	dditional	
22		27			5. Certificate of Status Desired	Fee Rec	luired	
City & State City & State					6. Election Campaign Financing	\$5.00 h		
23 Mc bourne FL 28 Melbourne			FC		Trust Fund Contribution	Added to	Fees	
2.0			Country	_	8. This corporation owes the current year Intar		_	
24 2'2901 25 US 29 3 2901 30				Personal Property Tax.				
	9. Name and Address of Current I	Registered Agent			10. Name and Address of New Registered A	gent		
			. 81	Name			1	
DOUGLASS, JEFFREY				82 Street Address (P.O. Box Number is Not Acceptable)				
1818 MALABAR LAKES DRIVE				Sueet A	rudiess (F.O. Box Hulliber to Hot / toophable)		ĺ	
PALM BAY FL 32905				-				
						Tas Zin C	'ada	
	•		84	City	FL	85 Zip C		
44 Disease	to the provisions of Costions 607 0502	and 607 1508. Florida Statutes	the above	-named c	corporation submits this statement for the purpose of c	hanging its	registered	
office or re	egistered agent, or both, in the State of	Florida. Such change was auth	orized by t	he corpo	corporation submits this statement for the purpose of cration's board of directors. I hereby accept the appoint	lment as reg	istered	
agent. I ar	m familiar with and accept the obligation	ns of, Section 607.0505, Florid	a Statutes.		(1/20/10)			
SIGNATURE	all afine				-14199			
	Signature, typed or printed name of registered agent a			signature re	ADDITIONS/CHANGES TO OFFICERS AND	DIDECTO	OS IN 12	
12.	OFFICERS AND		13.			Change	Addition	
TITLE	D	☐ DELETE	1.1 TITLE	- 1				
NAME	DOUGLASS, JEFFREY		1.2 NAME	i	Douglass, Jeffrey 4590-1 Beck Lake Trai	1		
STREET ADDRESS	1818 MALABAR LAKES DRIVE		1.3 STREET	ADDRESS (4590-1 Beck Lake Irai	,		
CITY-ST-ZIP	PALM BAY FL 32905		1.4 CITY-ST	-ZIP	Melbourne FL 32901			
TITLE		☐ DELETE	2.1 ΠTLE			☐ Change	☐ Addition	
NAME			2.2 NAME					
STREET ADDRESS			2.3 STREET	ADDRESS				
CITY-ST-ZIP			2, 4 CITY-ST	r-ZIP-				
TITLE		☐ DELETE	3.1 TITLE			☐ Change	Addition	
NAME	321		3.2 NAME			•	j	
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY-ST-ZIP			3.4. CITY-ST					
TITLE		☐ DELETE	4.1 TITLE	-		Change	Addition	
		<u> </u>	4. 2 NAME			-		
NAME	10 0 10 10 NO		4.2 STREET	ADDOLOG			ļ	
STREET ADDRESS							İ	
CITY-ST-ZIP	·	☐ DELETE	4.4 CITY-ST	-ZIP		Change	Addition	
TITLE		☐ DELETE	5.1 TITLE					
NAME			5.2 NAME			e		
STREET ADDRESS			5.3 STREET					
CITY-ST-ZIP			5.4 CfTY-ST	-ZIP				
TITLE		□ DELETE	6.1 TITLE			☐ Change	☐ Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY OT 71D			6.4 CITY-ST	-ZIP			1	

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 the receiver or trustee empowered.

SIGNATURE: