## **2007 FOR PROFIT CORPORATION**

DO NOT WRITE IN THIS SPACE

## ANNUAL REPORT

**DOCUMENT # P98000000635** 

INTEGRATED CLEANING SYSTEMS INTERNATIONAL, INC.



Principal Place of Business

3600 INVESTMENT LANE

SUITE 101

WEST PALM BEACH, FL 33404 US Mailing Address

P 0 BOX 10209

RIVIERA BEACH, FL 33419

US

## **FILED** Apr 04, 2007 08:00 Al Secretary of State



01042007

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0804505

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COLLETTE, KEVIN J **67 DUNBAR** 

PALM BEACH GARDENS, FL 33418

## DO NOT WRITE IN THIS SPACE

ş .					
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE			d Agent signature required when reinstating) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Finan     Trust Fund Contribution.	icing	\$5.00 May Be Added to Fees	U00000688880 04/11/07-80013-008 150.00
10.	OFFICERS AND DIRECT	TORS			
NAME STREET ADDRESS CITY-ST-ZIP	COLLETTE, KEVIN J 67 DUNBAR PALM BEACH GARDENS, FL 33418				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE		
NAME STREET ADDRESS CITY-ST-ZIP					
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TITLE NAME STREET ADDRESS				•	

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and has not 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 ipport as required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all paler like empowered.

SIGNATURE: \_

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNII

561-844-7760

Daytime Phone #