## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000011046

Entity Name: INTEGRAGROUP INTERNATIONAL, INC.

FILED Apr 18, 2007 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**Current Principal Place of Business: New Principal Place of Business:** 

126 KAYWOOD DRIVE 30205 RAINEY ROAD SANFORD, FL 32771 SORRENTO, FL 32776

**Current Mailing Address: New Mailing Address:** 

126 KAYWOOD DRIVE 30205 RAINEY ROAD SANFORD, FL 32771 SORRENTO, FL 32776

FEI Number: 59-3486273 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CHRISTENSON, HARRY O III CHRISTENSON, HARRY O III 126 KAYWOOD DRIVE 30205 RAINEY ROAD SANFORD, FL 32771 SORRENTO, FL 32776 US

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.

SIGNATURE: HARRY CHRISTENSON 04/18/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

( ) Delete Title: (X) Change ( ) Addition

Title: CHRISTENSON, HARRY CHRISTENSON, HARRY Name: Name: 126 KAYWOOD DRIVE 30205 RAINEY ROAD Address: Address: City-St-Zip: SANFORD, FL 32771 City-St-Zip: SORRENTO, FL 32776

( ) Delete Title: VSD Title: VSD (X) Change ( ) Addition Name: CHRISTENSON, KATHERINE Name: CHRISTENSON, KATHERINE 126 KAYWOOD DRIVE Address: 30205 RAINEY ROAD Address: SANFORD, FL 32771 SORRENTO, FL 32776 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HARRY CHRISTENSON PD 04/18/2007