## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # P98000100389 1. Entity Name

## INTEGRATED ECONOMIC SOLUTIONS CORPORATION

Principal Place of Business

Mailing Address

3940 RED ROCK WAY SARASOTA FL 34231

P O BOX 921

CRYSTAL BCH FL 34681-0921

2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 54-1751150 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MASON, ROBERT J Street Address (P.O. Box Number is Not Acceptable) 3940 RED ROCK WAY SARASOTA FL 34231 City Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. Change Addition TITLE ☐ Delete TITLE JOWETT, JAMES R NAME 954 POINT SEASIDE DR STREET ADDRESS STREET ADDRESS **CRYSTAL BCH FL 34681** CITY-ST-ZIP CITY-ST-ZIE ☐ Delete Change ☐ Addition TITLE MASON, ROBERT J NAME NAME 3940 RED ROCK WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34231 TITLE ☐ Addition ☐ Defete TITLE WEINER, LAWRENCE A NAME NAME 8411 CARDINAL GLEN COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP VIENNA VA 22182 ☐ Delete TITI F Change Addition TITLE KASHKASHIAN, DIKRAN NAME 5216 SUNNYDALE CIRCLE SOUTH NAME 205 TYSON DRIVE STREET ADDRESS STREET ADDRESS SARASOTA, FL 34233 CITY-ST-ZIP CITY-ST-ZIP FALLS CHURCH VA 22046 Change Addition TITLE ☐ Delete TITLE

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIE

DAVIDSON, GORDON M

6311 TISBURY DR

**BURKE VA 22015** 

☐ Delete

Addition

☐ Change

FILED Mar 06, 2000 8:00 am

**Secretary of State** 03-06-2000 90043 022 \*\*\*150.00

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