

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 29, 2002 8:00 am
Secretary of State

03-29-2002 91387 035 ***150.00
 08-29-2002 90006 042 ***550.00

DOCUMENT # P98000100389
1. Entity Name
INTEGRATED ECONOMIC SOLUTIONS CORPORATION

Principal Place of Business
 4506 RIVERVIEW BOULEVARD
 BRADENTON FL 34209

Mailing Address
 P O BOX 921
 CRYSTAL BCH FL 34681



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 2211 6TH STREET WEST

3. Mailing Address
 Suite, Apt. #, etc.
 P.O. Box 1948

City & State
 PALMETTO, FL

City & State
 NOKOMIS, FL

Zip
 34221

Country
 USA

Zip
 34274

Country
 USA

4. FEI Number 54-1751150

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
 MASON, ROBERT J
 4506 RIVERVIEW BLVD.
 BRADENTON FL 34209-1962

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 2211 6TH STREET WEST
 City PALMETTO FL Zip Code 34221

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 JR JOWETT, JAMES R. JOWETT, PRESIDENT
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOWETT, JAMES R 954 POINT SEASIDE DR CRYSTAL BCH FL 34681	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MASON, ROBERT J 4506 RIVERVIEW BOULEVARD BRADENTON FL 34209	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEINER, LAWRENCE A 4506 RIVERVIEW BOULEVARD BRADENTON FL 34209	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KASHKASHIAN, DIKRAN 1900 CASEY KEY ROAD NOKOMIS FL 34275	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIDSON, GORDON M 3940 RED ROCK WAY SARASOTA FL 34231	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2211 6TH STREET WEST PALMETTO, FL 34221
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1825 BRIGHTWATER BLVD, NE ST. PETERSBURG, FL 33704
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 6311 TISBURY CT. BURKE, VA 22015
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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.

SIGNATURE: JR JOWETT, JAMES R. JOWETT 7/7/02 727-711-8482
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/02)