

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000007889

Entity Name: INTEGRATED HABILITATION SERVICES, INC.

Current Principal Place of Business:

305 SOUTH FLAGLER AVENUE
HOMESTEAD, FL 33030

Current Mailing Address:

305 SOUTH FLAGLER AVENUE
HOMESTEAD, FL 33030

FEI Number: 03-0501612

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MAYO, ELLA
305 SOUTH FLAGLER AVENUE
HOMESTEAD, FL 33030 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name MAYO, ELLA
Address 305 SOUTH FLAGLER AVENUE
City-State-Zip: HOMESTEAD FL 33030

Title SEC
Name MARCIE, SANDERS
Address 305 S. FLAGLER AVE
City-State-Zip: HOMESTEAD FL 33030

I hereby 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 all other like empowered.

SIGNATURE: ELLA MAYO

VP

04/02/2015

Electronic Signature of Signing Officer/Director Detail

Date