

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000035354

**Entity Name:** INTEGRATED BUSINESS SOLUTIONS, INC.

**Current Principal Place of Business:**

4920 SW 4TH CIR  
OCALA, FL 34471-7489

**Current Mailing Address:**

4920 SW 4TH CIR  
OCALA, FL 34471-7489 US

**FEI Number:** 65-0912212

**Certificate of Status Desired:** No

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

SENTI, MOISES E  
4920 SW 4TH CIR  
OCALA, FL 34471-7489 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	P	Title	T
Name	SENTI, MOISES E	Name	SENTI, ANGELINA
Address	4920 SW 4TH CIR	Address	4920 SW 4TH CIR
City-State-Zip:	OCALA FL 34471-7489	City-State-Zip:	OCALA FL 34471-7489

*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:** MOISES E SENTI

PRS

04/19/2019

Electronic Signature of Signing Officer/Director Detail

Date