

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F02000005443

**FILED**  
**Feb 06, 2016**  
**Secretary of State**  
**CC6530905093**

**Entity Name:** INTEGRATED INDUSTRIAL SERVICES, INC.

**Current Principal Place of Business:**

121 DICKENS ROAD  
FUQUAY-VARINA, NC 27526

**Current Mailing Address:**

121 DICKENS ROAD  
FUQUAY-VARINA, NC 27526

**FEI Number: 56-1794392**

**Certificate of Status Desired: No**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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            C  
Name            ROMANO, JAMES D  
Address        121 DICKENS ROAD  
City-State-Zip: FUQUAY-VARINA NC 27526

Title            T  
Name            ROMANO, RICHARD C  
Address        121 DICKENS ROAD  
City-State-Zip: FUQUAY-VARINA NC 27526

Title            P  
Name            YOUNGQUIST, MARK  
Address        121 DICKENS ROAD  
City-State-Zip: FUQUAY-VARINA NC 27526

Title            VP OF ADMINISTRATION  
Name            FLEMING, LORI  
Address        121 DICKENS ROAD  
City-State-Zip: FUQUAY-VARINA NC 27526

Title            VP OF PRECONSTRUCTION  
Name            ANGELO, PATRICK  
Address        121 DICKENS ROAD  
City-State-Zip: FUQUAY-VARINA NC 27526

*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: LORI S. FLEMING**

**VP OF ADMINISTRATION    02/06/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date