No. **C 41356**	**Due no later than Aug 31, 2014**	2. Registered Agent and Address **(NO PO BOX)**
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	**Annual Report Form** **1. Mailing Address: Correct in this box if needed.** INTEGRATED PHARMACEUTICALS, INC. DAVID H SMITH 34 SHOREHAVEN ROAD NORWALK CT 06855	COLUMBIA STOCK TRANSFER 601 E SELTICE WAY #202 POST FALLS ID 83844 3. New Registered Agent Signature:*

4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT	DAVID H SMITH	34 SHOREHAVEN ROAD	NORWALK	CT	USA	06855
SECRETARY	DAVID H SMITH	34 SHOREHAVEN ROAD	NORWALK	CT	USA	06855
TREASURER	DAVID H SMITH	34 SHOREHAVEN ROAD	NORWALK	CT	USA	06855
DIRECTOR	DAVID H SMITH	34 SHOREHAVEN ROAD	NORWALK	CT	USA	06855
DIRECTOR	SALLY JOHNSON-CHIN	1 FIELDSTONE DRIVE	WINCHESTER	MA	USA	01890
DIRECTOR	PETER FEATHERSTON	775 SILVER SPRING ROAD	FAIRFIELD	CT	USA	06824

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **C 41356**	Signature: David H Smith	Date: 07/22/2014
	Name (type or print): David H Smith	Title: President

Processed 07/22/2014

* Electronically provided signatures are accepted as original signatures.