



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012

Filing Period: January 1 - March 1 • **Filing Fee:** \$50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**
* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 72424		2. Name of Corporation INTEGRITY AIR SERVICES, INC.		
3. Street Address Principal Business Office 63 TOM HARVEY ROAD		City WESTERLY	State RI	Zip 02891
4. Business Phone No. 401-348-0018		5. State of Incorporation RHODE ISLAND		
6. Brief Description of the Character of Business Conducted in Rhode Island AVIATION AVIONICS & INSTRUMENTS OVERHAUL AND REPAIR				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name PHILLIP A. CANNAVO		Vice President Name NONE		
Street Address 320 BAYSHORE DRIVE		Street Address		
City TERRA CEIA	State FL	Zip 34250	City	State
Secretary Name NONE		Treasurer Name NONE		
Street Address		Street Address		
City	State	Zip	City	State
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name LYDIA J. CANNAVO		Director Name		
Street Address 320 BAYSHORE DRIVE		Street Address		
City TERRA CEIA	State FL	Zip 34250	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
9. SHARES AUTHORIZED				
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
ISSUED SHARES — THIS SECTION MUST BE COMPLETED				
Number of Shares		Class/Series	Par Value	
1,000 NO PAR VALUE		COMMON	NONE	
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.				

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Phillip A. Cannavo
Signature
PHILLIP A. CANNAVO
Print or Type Name
PRESIDENT
Title
Date **1/31/12**

FILED

File Date
JAN 23 2012

Check No.
19806

By: **BY**

FOR SECRETARY OF STATE USE ONLY