

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **G09798** (1)

1. Corporation Name

**INTERNATIONAL EXPLORERS SOCIETY, INC.**



Principal Place of Business

Mailing Address

5151 PINE TREE DRIVE  
MIAMI BEACH FL 33140  
US

5151 PINE TREE DRIVE  
MIAMI BEACH FL 33140  
US

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

11/29/1982

3a. Date of Last Report

05/11/1995

4. FEI Number

59-2391484

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes  No

9. Name and Address of Current Registered Agent

SPOHRER, B. F.  
5151 PINE TREE DRIVE  
MIAMI BEACH FL 33140

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0503, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Required for all filings)

Signature of Registered Agent (Required for all filings)

DATE

12. OFFICERS AND DIRECTORS

12.1 TITLE	SD	<input type="checkbox"/> DELETE
12.2 NAME	SPOHRER, LYNN W	
12.3 STREET ADDRESS	5151 PINE TREE DRIVE	
12.4 CITY, ST, ZIP	MIAMI BEACH FL	
12.5 TITLE	CPT	<input type="checkbox"/> DELETE
12.6 NAME	SPOHRER, BF	
12.7 STREET ADDRESS	5151 PINE TREE DRIVE	
12.8 CITY, ST, ZIP	MIAMI BEACH FL	
12.9 TITLE		<input type="checkbox"/> DELETE
12.10 NAME		
12.11 STREET ADDRESS		
12.12 CITY, ST, ZIP		
12.13 TITLE		<input type="checkbox"/> DELETE
12.14 NAME		
12.15 STREET ADDRESS		
12.16 CITY, ST, ZIP		
12.17 TITLE		<input type="checkbox"/> DELETE
12.18 NAME		
12.19 STREET ADDRESS		
12.20 CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.1 TITLE	
13.2 NAME	
13.3 STREET ADDRESS	
13.4 CITY, ST, ZIP	
13.5 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.6 NAME	
13.7 STREET ADDRESS	
13.8 CITY, ST, ZIP	
13.9 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.10 NAME	
13.11 STREET ADDRESS	
13.12 CITY, ST, ZIP	
13.13 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.14 NAME	
13.15 STREET ADDRESS	
13.16 CITY, ST, ZIP	
13.17 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.18 NAME	
13.19 STREET ADDRESS	
13.20 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *B.F. Spohrer* B.F. SPOHRER FEB 19, 1996 (305)871-8212

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Day/Year/Phone #

CR2E034 (12/95)