

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jun 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra E. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000074990

1. Corporation Name

Industrial Electronic Services, Inc.
(f/k/a Transformercircuitswitch, Inc.)

Principal Place of Business

749 U.S. Highway, South
Yulee, FL 32097

Mailing Address

749 U.S. Highway, South
Yulee, FL 32097

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

9/10/96

2. Principal Place of Business

21 723 U.S. HWY 17, SOUTH

2a. Mailing Address

26 P O BOX 1870

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Yulee, FL

City & State

28 Yulee, FL

Zip

32097

Country

25 USA

Zip

29 320 41-1870

Country

30 USA

4. FEI Number

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 owes or has paid the current year intangible
Personal Property Tax due June 30.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

Peter A. Baumgaertner
LeBoeuf, Lamb, Greene & MacRae, L.L.P.
50 N. Laura Street, Suite 2800
Jacksonville, FL 32202

10. Name and Address of New Registered Agent

81 Name

WILLIAM E. TEAL, SR.

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

828 BAISDEN ROAD

83

84 City

JACKSONVILLE

FL

85 Zip Code

32218

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 607.0505, Florida Statutes.

SIGNATURE

William E. Teal, Sr.

(Typed Name of Registered Agent and the Applicant)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME Teal, William E., Sr.
STREET ADDRESS 1231 U.S. Highway, South
CITY-ST-ZIP Yulee, FL 32097

TITLE DST ☐ DELETE

NAME Teal, Betty D.
STREET ADDRESS 1231 U.S. Highway, South
CITY-ST-ZIP Yulee, FL 32097

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☒ Change ☐ Addition

12 NAME 828 BAISDEN ROAD
13 STREET ADDRESS JACKSONVILLE, FL 32218
14 CITY-ST-ZIP

21 TITLE ☒ Change ☐ Addition

22 NAME 828 BAISDEN ROAD
23 STREET ADDRESS JACKSONVILLE, FL 32218
24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *William E. Teal, Sr.* William E. Teal, Sr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

EXPIRATION DATE

CR2E034 (10/97)