

**2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F15000004660

**FILED**  
**Jan 29, 2019**  
**Secretary of State**  
**0789101043CC**

**Entity Name:** INTERNATIONAL ACCREDITATION SERVICE, INC.

**Current Principal Place of Business:**

5360 WORKMAN MILL ROAD  
WHITTIER, CA 90601

**Current Mailing Address:**

5360 WORKMAN MILL ROAD  
WHITTIER, CA 90601 US

**FEI Number: 04-3649274**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 DIRECTOR  
Name BRADLEY, TIM  
Address 1202 MAIL SERVICE CENTER  
City-State-Zip: RALEIGH NC 27699

Title PRESIDENT, DIRECTOR  
Name RAMANI, C. P.  
Address 5360 WORKMAN MILL ROAD  
City-State-Zip: WHITTIER CA 90601

Title SECRETARY  
Name NATHAN, RAJ  
Address 5360 WORKMAN MILL ROAD  
City-State-Zip: WHITTIER CA 90601

Title CFO  
Name BELCIK, JOHN  
Address 5360 WORKMAN MILL ROAD  
City-State-Zip: WHITTIER CA 90601

Title DIRECTOR  
Name TOSCAS, JAMES G  
Address 209 W. JACKSON BLVD  
STE 500  
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR  
Name DECOURCY, DAVID  
Address 500 NEW JERSEY AVE, NW  
6TH FLOOR  
City-State-Zip: WASHINGTON DC 20001

Title DIRECTOR  
Name KATKHUDA, DR. IZZ EDDIN  
Address 5360 WORKMAN MILL ROAD  
City-State-Zip: WHITTIER CA 90601

Title DIRECTOR  
Name JOHNSON, GREG  
Address 375 JACKSON STREET  
STE 220  
City-State-Zip: SAINT PAUL MN 55101

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*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: RAJ NATHAN**

**SECRETARY**

**01/29/2019**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name HASENIN, ISAM  
Address 1416 C STREET  
City-State-Zip: LIVINGSTON CA 95334

Title DIRECTOR  
Name DABDOUB, MAJED A.  
Address 3300 CENTRAL PKWY  
City-State-Zip: CINCINNATI OH 45225

Title VP  
Name MCCULLEN, PATRICK V  
Address 5360 WORKMAN MILL ROAD  
City-State-Zip: WHITTIER CA 90601

Title DIRECTOR, VC  
Name BARRIOS, JOHN L  
Address 1400 N. BOULEVARD AVE  
City-State-Zip: TAMPA FL 33607

Title CHAIRMAN, DIRECTOR  
Name BOUSE, MICHAEL W.  
Address 240 WATER ST  
City-State-Zip: HENDERSON NV 89009

Title DIRECTOR  
Name MATA, SELSO A  
Address 1520 AVENUE K  
City-State-Zip: PLANO TX 75074