DOCUMENT # F99000005189

1. Entity Name
INTERNATIONAL EDUCATIONAL MISSIONS, INC.

FILED
Feb 12, 2007 08:00 AM
Secretary of State

Principal Place of Business	Mailing Address
10411 UTOPIA CIRCLE E BOYNTON BEACH, FL 33437	P O BOX 740-300 BOYNTON BEACH, FL 33437

01062007 No Chg-NP CR2E037 (4/06)

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4. FEI Number
52-1526718
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	KRIEGER, RICHARD HON.
STREET ADDRESS	1041 UTOPIA CIRCLE EAST
CITY-ST-ZIP	BOYNTON BEACH, FL 33437
TITLE	VP
NAME	KRIEGER, STEPHANIE
STREET ADDRESS	1041 UTOPIA CIRCLE EAST
CITY-ST-ZIP	BOYNTON BEACH, FL 33437
TITLE	ST
NAME	KRIEGER, MARLENE
STREET ADDRESS	1041 UTOPIA CIRCLE EAST
CITY-ST-ZIP	BOYNTON BEACH, FL 33437
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard Krieger 2-10-07 (561) 733-0347
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #