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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **G11770** (6)

1. Corporation Name

INDUSTRIAL ENVIRONMENTAL SYSTEMS, INC.

Principal Place of Business

**8300 SW 8TH ST., #303
MIAMI FL 33144**

Mailing Address

**8300 SW 8TH ST., #303
MIAMI FL 33144**



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

**MELENDEZ-INSUA, JUANA
8300 SW 8TH ST., #303
MIAMI FL 33144**

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 607.1535, Florida Statutes, the above named corporation signs 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

Signature of person who is the registered agent, or the person who is the registered agent's authorized representative.

Signature of person who is the registered agent, or the person who is the registered agent's authorized representative.

DATE

12. OFFICERS AND DIRECTORS

TITLE **VD** ☐ DELETE

NAME **RODRIGUEZ, MIRTA S**
STREET ADDRESS **CONCEPCION ARENAL 4232**
CITY- ST- ZIP **BUENOS AIRES, ARGENT**

TITLE **PD** ☐ DELETE

NAME **MOFISOVICH, MARTIN M**
STREET ADDRESS **CONCEPCION ARENAL 4232**
CITY- ST- ZIP **BUENOS AIRES, ARGENT**

TITLE **S** ☐ DELETE

NAME **PALACI, DAVID**
STREET ADDRESS **8500 SW 8TH ST. #202**
CITY- ST- ZIP **MIAMI FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
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32 NAME
33 STREET ADDRESS

34 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(9)(b), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Martin Mofsoovich

March 13, 1996

CR2E034 (12/95)