

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **J73013**

(1)

1. Corporation Name
INDUSTRIAL ENGINEERING SYSTEMS, INC.

FILED
Jan 21 1997 8:00am
Secretary of State



Principal Place of Business
3888 WOODLAKE DR
BONITA SPRINGS FL 33923
US

Mailing Address
PO BOX 2528
BONITA SPRINGS FL 34133-2528

2. Principal Place of Business 3888 WOODLAKE DR.	2a. Mailing Address 26 Suite, Apt #, etc. 27	3. Date Incorporated or Qualified 05/11/1987	3a. Date of Last Report 01/23/1996
22 City & State BONITA SPRINGS FL.	28 City & State	4. FEI Number 59-2808885	Applied For Not Applicable
24 Zip 34134	Country USA	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
25 34134	Zip 29	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent SPEAR, JOHN 9200 BONITA BCH RD STE 204 BONITA SPRINGS FL 33923		81 Name PROF HENRY A. BENAREY 82 Street Address (P.O. Box Number is Not Acceptable) 3888 WOODLAKE DRIVE 83 84 City BONITA SPRINGS FL 34134	
10. Name and Address of New Registered Agent		DATE 01-07-97	

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 *PROF HENRY A. BENAREY*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP PST BENAREY, HENRY A. 3888 WOODLAKE DRIVE BONITA BAY FL	<input type="checkbox"/> DELETE 11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP VD VON DER BEEK, H. H. AN DREI LINDEN 8A DUESSELDORF, GERMANY	<input type="checkbox"/> DELETE 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> DELETE 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> DELETE 41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> DELETE 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> DELETE 61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do 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: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-97 941-957-
Date Daytime Phone # 4723

CR2E034 (9/96)