2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2004
Secretary of State

DOCUMENT# L00000004347

Entity Name: INDUSTRIAL ENGINEERING SERVICES, LLC

Current Principal Place of Business:

ROUTE 3 BOX 1066
MADISON, FL 32340

New Principal Place of Business:

PO BOX 5405
TAMPA, FL 33675

Current Mailing Address:

P.O. BOX 5405
TAMPA, FL 33675

New Mailing Address:

FEI Number: 59-3639012 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CURRY, CLIFTON C JR
750 W LUMSDEN RD
BRANDON, FL 33511 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: COLEMAN, DANIEL E
Address: ROUTE 3 BOX 1066
City-St-Zip: MADISON, FL 32340

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: KNIGHT, JAMES W
Address: 425 50TH STREET SOUTH
City-St-Zip: TAMPA, FL 33619

Title: MGRM ( ) Change (X) Addition
Name: RENNERT, BRIAN
Address: 4417 HILL DRIVE
City-St-Zip: VALRICO, FL 33594

Title: MGRM ( ) Change (X) Addition
Name: GONZALEZ, JACKIE
Address: PO BOX 2109
City-St-Zip: BRANDON, FL 33509

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JACKIE GONZALEZ MGRM 04/16/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date