## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 16, 2004 8:00 am Secretary of State DOCUMENT # L15470 04-16-2004 90069 001 \*\*\*150.00 INTERNATIONAL ENGINEERING SERVICES. INC. Principal Place of Business Mailing Address TAUDATOR 3726A SILVER STAR ROAD 3726A SILVER STAR ROAD 3726A SILVER STAR ROAD 3726A SILVER STAR ROAD ORLANDO, FL 32808 ORLANDO, FL 32808 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04022004 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 59-2968950 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ASHE, DONALD E 3726A SILVER STAR ROAD Street Address (P.O. Box Number is Not Acceptable) ORLANDO, FL 32808 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees - OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE ☐ Delete TITLE ☐ Addition ASHE, DONALD E. NAME NAME STREET ADDRESS 3726A SILVER STAR RD. STREET ADDRESS CITY-ST-ZIP ORLANDO, FL CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition ASHE, BETTY C NAME NAME STREET ADDRESS 3726A SILVER STAR RD STREET ADDRESS CITY-ST-ZIP ORLANDO, FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition PENDLETON, TAMI L NAME NAME STREET ADDRESS 3726-A SILVER STAR RD. STREET ADDRESS ORLANDO, FL CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS

12. I 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all prine like empowered.

SIGNATURE:

FILED