

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 15, 2005 8:00 am
Secretary of State

03-15-2005 90039 039 ***150.00

DOCUMENT # L15470

1. Entity Name

INTERNATIONAL ENGINEERING SERVICES, INC.



Principal Place of Business

3726A SILVER STAR ROAD
3726A SILVER STAR ROAD
ORLANDO FL 32808

Mailing Address

3726A SILVER STAR ROAD
3726A SILVER STAR ROAD
ORLANDO FL 32808

50026762



1st MOORE

CR2E034 (10/04)

2. Principal Place of Business

265 NORTH IVEY LANE

3. Mailing Address

265 NORTH IVEY LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ORLANDO FL 32811

City & State

ORLANDO FL

4. FEI Number

59-2968950

Applied For

Not Applicable

Zip

32811

Country

USA

Zip

32811

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ASHE, DONALD E.
3726A SILVER STAR ROAD
ORLANDO FL 32808

7. Name and Address of New Registered Agent

Name ASHE, DONALD E.

Street Address (P.O. Box Number is Not Acceptable)

265 NORTH IVEY LANE

City ORLANDO

FL

Zip Code 32811

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	ASHE, DONALD E.	
STREET ADDRESS	3726A SILVER STAR RD.	
CITY-ST-ZIP	ORLANDO FL	
TITLE	V	<input type="checkbox"/> Delete
NAME	ASHE, BETTY C	
STREET ADDRESS	3726A SILVER STAR RD	
CITY-ST-ZIP	ORLANDO FL	
TITLE	ST	<input type="checkbox"/> Delete
NAME	PENDLETON, TAMI L	
STREET ADDRESS	3726-A SILVER STAR RD.	
CITY-ST-ZIP	ORLANDO FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	265 NORTH IVEY LANE	
CITY-ST-ZIP	ORLANDO, FL 32811	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	265 NORTH IVEY LANE	
CITY-ST-ZIP	ORLANDO, FL 32811	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	265 NORTH IVEY LANE	
CITY-ST-ZIP	ORLANDO, FL 32811	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 other like empowered.

SIGNATURE:

BETTY C. ASHE

Betty C. Ashe, V.P.

3/8/05

407-292-0852

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #