## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

N46086

(7)

## THE INTERNATIONAL INSTITUTE OF FORENSIC ENGINEER ING SCIENCES, INC.

2031 SW 36 AVE   P.O. BOX 478   FT. LAUDERDALE FL 33302-0478   US     3. Date Incorporated or Qualified 11/18/1991   02/21/1996   02/	ING SCIENCES, INC.								
Fire   LaDDERDALE FL 330124208   Fire   LaDDERDALE FL 330124008   S. Date of Date in State Report   S. Date in Proceedings of Capabilities   S. Date of Date in State Report   S. Date   S. Date of Date in State Report   S. Date   S. Da	Principal Place	e of Business	Mailing Address	•		LEGITED   DES DES DESTRUCTED   15   15   15   15   15   15   15   1	il 8 (8 (4 0 18 1) 0 (8 (1) 0 (8 )	er bibli ibbi	
2. Principal Place of Business	FT. LAUDERDALE FL 33312-4208		FT. LAUDERDALE FL 33302-0478			Data of Look D			
Suite, Apr. 8, etc.    22									
Suite, April #, cic   Suite   Suite, April #, cic   Suite, April #	2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Ap	plied For	
Complete   Status	21		,			65-0330050		<del>/</del>	
28	Suite, Apt.	#, etc.	27			5. Certificate of Status Desired	<b>*</b>		
28	City & State	0	——— ·			· · · · · ·			
FISHE, GERALD R A 2031 SW 36 AVENUE FT LAUDERDALE FL 33312  F1   Pursuant to the provisions of Socions 617 0502 and 617 1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent and marker with, and accept the other of 17 0502 and 617 1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent and marker with, and accept the other of 17 0503, Florida Statutes. The above named corporation's board of directors. I hereby accept the appointment as registered agent and marker with, and accept the other of 17 0503, Florida Statutes.  SIGNATURE  12.		<del>                                     </del>	— — · — — —	_	У	Process Control of the Control of th		199.032,	
FISHE, GERALO R A   2031 SW 36 AVENUE   FT LAUDERDALE FL 33312   83   Street Address (P.O. Box Number is Not Acceptable)	24			0					
FISHE, GERALD R A 2031 SW 36 AVENUE FT LAUDERDALE FL 33312    64   City		g. Name and Address of Culter	it uadiotaten vilatit	81	Name	10. Name and Address of New Registe	PO Agoin		
2031 SW 36 AVENUE FT LAUDERDALE FL 33312  24	FISHE G	REPAIN R A				Address (D.O. Boy Myrobas is Not Accordable)			
Section   Part				04	Street	Address (P.O. Box Number is Not Acceptable)			
Part   Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutos, the above-named corporation submits this statement for the purpose of changing lis registered agent, or both, in this State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and familiar with, and accept the obligations of, Section 617.0503, Florida Statutos.    Signature   Part	FT LAUD	ERDALE FL 33312		BS	3				
11. Pix.Lant to The provisions of Socions 617 0502 and 617 1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agont 1 am familian with, and accept the obtigations of, Socion 617 0503, Florida Statutes.    SIGNATURE				84	City		85 Zip (	Code	
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 agent and an accept the obligations of, Section 617,0503, Florida Statutes.  SIGNATURE    Signature, type of present name of registered agent	11. Pursuant	to the provisions of Sections 617 050	12 and 617 1508. Florida Statutes	the abov	/e-named			s registered	
SIGNATURE   SignAlum_type+1 or protect factors of price as given as a like if applicable   INSTER PRODUCTIONS   INSTITUTE   INTER PRODUCTIONS   INTEREST AND DIRECTORS	office or a	edistored agent, or both, in the State	of Florida, Such change was aut	thorized b	w the corr				
12.	_								
TITLE					gent signature	9/	· -		
NAME				4	··· ;	ADDITIONS/CHANGES TO OFFICERS			
STREET ADDRESS   1901 S.E. 24 AVE	i l		<del></del>				C Diversity	Magnetin	
CITY-ST-2PP	1 1	_	•						
TITLE									
STREET ADDRESS   A840 NEWCOMB DR   BATON ROUGE LA   2.3 STREET ADDRESS   2.4 CITY-ST-ZIP			☐ DELETE				Change	☐ Addition	
DELETE   SD	NAME	TIMS, EUGENE F.							
DELETE   SO	STREET ADDRESS			2.3 STREE	ET ADDRESS				
NAME   SCHORR, STEVEN M. P.E.   3.2 NAME   3.3 STREET ADDRESS   1603 OLD YORK RD   3.4 CITY-ST-ZIP   ABINGTON PA   3.4 CITY-ST-ZIP   TITLE   Change   Addition   Ad									
STREET ADDRESS	'						L Change	Addition	
ABINGTON PA   3.4 CITY-ST-ZIP   TD									
TITLE TD DELETE 4.1 TITLE Change Addition  NAME FISHE, GERALD R.A. P.E.  STREET ADDRESS  CITY-ST-ZIP  TITLE DORION, ROBERT B J  STREET ADDRESS  CITY-ST-ZIP  DORION, ROBERT B J  STREET ADDRESS  CITY-ST-ZIP  TITLE DORION, ROBERT B J  STREET ADDRESS  CITY-ST-ZIP  TITLE DORION, ROBERT B J  STREET ADDRESS  CITY-ST-ZIP  TITLE PD DELETE 61 TITLE  PD DELETE 61 TITLE  STREET ADDRESS  TITLE PD DELETE 62 NAME  STREET ADDRESS  STREET ADDRESS  TITLE DORION, HAROLD J. P.E  STREET ADDRESS  CITY-ST-ZIP  STREET ADDRESS  CITY-ST-ZIP  BURLINGTON, ONT CAN  64 CITY-ST-ZIP  BURLINGTON, ONT CAN	' ' ' ' ' '			1	·				
NAME			DELETE				Channe	Addition	
STREET ADDRESS   2031 SW 36 AVE			La price				Land Gridings	territori (IIII)	
TITLE   D									
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STREET ADDRESS  1 PLACE VILLE-MARIE 1521 53 STREET ADDRESS  CITY-ST-ZIP  MONTREAL, QC, CANADA 54 CITY-ST-ZIP  TILLE PD Change Addition  NAME WILKINSON, HAROLD J. P.E 62 NAME STREET ADDRESS 1022 WATERDOWN RD 63 STREET ADDRESS CITY-ST-ZIP BURLINGTON, ONT CAN 64 CITY-ST-ZIP	NAME	_		5.2 NAME					
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CITY-ST-ZIP BURLINGTON, ONT CAN 64 CITY-ST-ZIP				6.2 NAME					
	STREET ADDRESS			6.3 STREI	ET ADDRESS				
			d with this filing does not accelle.			totad in Section 110 07/2/// Elevide State 455 15	uthor positive street	tha	

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 eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an attachment with an address.

GELDIN R. A. FISING 1-28-97 (954) 681 489 8

MAECTOR Date Dayline Proce \* 0035436

**FILED** 

Feb 05 1997 8:00am

Secretary of State