

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P94000063487 (0)

1. Corporation Name

THE INTERNATIONAL ENGINEERING ACADEMY & SOCIETY  
FOR PROMOTION OF LOGICAL MATHEMATICS, INCORPORAT



Principal Place of Business

220  
HWY 41 BY-PASS  
VENICE FL 34292

Mailing Address

220  
HWY 41 BY-PASS  
VENICE FL 34292

2. Principal Place of Business

2a. Mailing Address

21 220 US 41 By Pass S.

26 220 US 41 By Pass S.

3. Date Incorporated or Qualified

08/24/1994

3a. Date of Last Report

03/23/1995

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

22

27

City & State

City & State

23 Venice Florida

28 Venice Florida

Zip

Country

Zip

Country

24 34292

25 SARASOTA

29 34292

30 SARASOTA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CLARK, ASKEW H  
220 HWY 41 BY-PASS  
VENICE FL 34292

81

Name

ASKEW H. CLARK

82

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

220 US 41 By Pass S.

83

84

City

Venice

FL

85 Zip Code

34292

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-10-96

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D  
CLARK, ASKEW H  
STREET ADDRESS 220 HWY 41 BY-PASS  
CITY-ST-ZIP VENICE FL 34292

TITLE ☐ DELETE

NAME D  
HOROBEC, PAUL A  
STREET ADDRESS 25 GULF MANOR DR.  
CITY-ST-ZIP VENICE FL 34285

TITLE ☐ DELETE

NAME D  
SULA, KENNETH  
STREET ADDRESS 1240 SLEEPY HOLLOW DR.  
CITY-ST-ZIP VENICE FL 34292

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

220 US 41 By Pass S.  
Venice FL 34292

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

23 April, 1996 AD

Date

Daytime Phone #

CR2E034 (12/95)