

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 1, 1996
AMOUNT DUE ON OR BEFORE 8/1/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000061508

1. Corporation Name

International Engineered Systems, LTD., Inc.

Principal Place of Business

7850 NW 146th Street
Suite 417
Miami Lakes, FL 33016

Mailing Address

1304 SW 160th Avenue
Suite 659
Ft. Lauderdale, FL 33326

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified
8/8/95

3a. Date of Last Report

4. FEI Number

65-0611421

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

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

9. Name and Address of Current Registered Agent

Jose R Baz
1304 SW 160th Avenue
Suite 659
Ft. Lauderdale, FL 33326

10. Name and Address of New Registered Agent

81 Name

Maria A. Acosta

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

1304 SW 160th Avenue, Suite 659

83

84 City

Ft. Lauderdale,

FL

85 Zip Code

33326

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.

PRESIDENT

10/23/96

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE Director ☒ DELETE
NAME Joe R Baz
STREET ADDRESS 1304 SW 160th Avenue, Suite 659
CITY-ST-ZIP Ft. Lauderdale, FL 33326

TITLE Director ☒ DELETE
NAME Maria A. Baz
STREET ADDRESS 1304 SW 160th Avenue, Suite 659
CITY-ST-ZIP Ft. Lauderdale, FL 33326 ☐ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 President ☐ Change ☒ Addition
1.2 NAME Maria A. Acosta
1.3 STREET ADDRESS 1304 SW 160th Avenue, Suite 659
1.4 CITY-ST-ZIP Ft. Lauderdale, FL 33326 ☐ Change ☒ Addition

2.1 TITLE Vice-President
2.2 NAME Pedro C. Peraza
2.3 STREET ADDRESS 7850 NW 146th Street, Suite 417
2.4 CITY-ST-ZIP Miami Lakes, FL 33016 ☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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 617, 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

10/23/96

954-349-0994

Date

Daytime Phone #

AMENDED #1
61.25

FILED

96 OCT 28 AM 11:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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