2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000035134

Entity Name: INTERNATIONAL ENVIRONMENTAL TECHNOLOGIES, INC.

FILED Apr 27, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5692 FOX HOLLOW DRIVE 6758 CANARY PALM CIRCLE BOCA RATON, FL 33433 SUITE C BOCA RATON, FL 33486 **New Mailing Address: Current Mailing Address:** 176 CLUB VILLA LANE KISSIMMEE, FL 34744 FEI Number: 65-0666456 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PERKINSON, EDWIN L PERKINSON, EDWIN L 5692 FOX HÓLLOW DRIVE 6758 CANARY PALM CIRCLE BOCA RATON, FL 33433 SUITE C BOCA RATON, FL 33486 US 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.

Election Campaign Financing Trust Fund Contribution ().

4785 PINE TREE DRIVE

BOYNTON BEACH, FL 33436

OFFICERS AND DIRECTORS:

SIGNATURE:

Name: Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

04/27/2005

Date

Title: () Delete Title: (X) Change () Addition PERKINSON, EDWIN L PERKINSON, EDWIN L Name: Name: 5692 FOX HOLLOW DRIVE 6758 CANARY PALM CIRCLE Address: Address: City-St-Zip: BOCA RATON, FL 33486 City-St-Zip: BOCA RATON, FL 33433

Title: P () Delete Title: () Change () Addition
Name: PERKINSON, WANDA C Name:

Address: 176 CLUB VILLA LANE Address: City-St-Zip: KISSIMMEE, FL 34744 City-St-Zip:

Electronic Signature of Registered Agent

 Title:
 VP
 () Delete
 Title:
 VP
 (X) Change () Addition

 Name:
 PERKINSON, EDWIN L
 Name:
 PERKINSON, EDWIN L

Address: 5692 FOX HOLLOW DRIVE Address: 6758 CANARY PALM CIRCLE
City-St-Zip: BOCA RATON, FL 33486 City-St-Zip: BOCA RATON, FL 33433

Title: ST () Delete Title: () Change () Addition Name: GILLIS, LYNNE C Name:

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WANDA C. PERKINSON P 04/27/2005