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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$90721

1. Corporation Name

INDUSTRIAL EQUIPMENT TECHNOLOGY, SOUTHEAST INC.

Principal Place of Business Mailing Address						
612 N ORANGE AVE P O BOX 1616 A-6 JUPITER FL 33468						DO MOT INDITE IN THE OPACE
JUPITER FL 33458 US						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed
US						10/30/1991
2. Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For
21		26				65-0298234 Not Applicable
Suite, Apt. #, etc. 22 City & State 23 Zip Country 24 9. Name and Address of Current		Suite, Apt. #, etc.				5. Certificate of Status Desired See Required
		27				
–		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
		28	Cou	-4-1		
一 ・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・	┌─ ┐ .´ .	Zip		пигу		8. This corporation owes the current year Intangible Personal Property Tax O Yes No
24		29	30			Personal Property Tax. Yes JNo 10. Name and Address of New Registered Agent
	9. Name and Address of Curren	t Registered Agent		81	Name	
Braunworth, Steven						
182 E HAMPTON WAY				82	Street A	Address (P.O. Box Number is Not Acceptable)
JUPITER FL 33458				83		
0011	IEM I E 00400			03		·
				84	City	FL 85 Zip Code
agent. I ar SIGNATURF	n familiar with, and accept the obligation	tions of, Section 607.0505, Flo	noa Stat	utes	•	poration's board of directors. I hereby accept the appointment as registered required when reinstating) DATE
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 11	TLE		☐ Change ☐ Addition
NAME	Braunworth, Steven		1.2 N	AME	1	• , ,
STREET ADDRESS	61 HICKORY HILL RD		1.3 S1	TREET	ADDRESS	
CITY-ST-ZIP	TEQUESTA FL		1.4 Ci	TY-SI	r-ZiP	
TITLE	D	☐ DELETE	2.1 11	TLE	["	☐ Change ☐ Addition
NAME	JENNINGS, RUSS		2.2 N	AME		
STREET ADDRESS	1702 WESTCLIFF DR		2.3 S	TREE1	ADDRESS	
CITY-ST-ZIP	MARYVILLE TN ~	,	2.40	ITY-S	T-ZIP- ·	The second secon
TITLE		☐ DELETE	3.1 TI	TLE		Change Addition
NAME			3.2 N	AME		•
STREET ADDRESS			3.3 S	TREET	ADDRESS	; ·
CITY-ST-ZIP	_		3.4. C	ITY-S	T-ZIP	
TITLE		☐ DELETE	4.1 TI	TLE		Change Addition
NAME	The second second second		4.2N	IAME	}	
STREET ADDRESS	; .		4.3 S	TREET	ADDRESS	;
CITY-ST-ZIP			4.4 C	ITY-S	T-ZIP	
TITLE		☐ DELETE	5.1 TI	ΠLE	1	☐ Change ☐ Addition
NAME			5.2 N	AME		,
STREET ADDRESS			5.3 S	TREET	ADDRESS	
CITY-ST-ZIP				ITY-S	T-ZIP	
TITLE		☐ DELETE	6.1 TI		1	☐ Change ☐ Addition
NAME			6.2 N			
STREET ADDRESS			6.3 \$	TREET	TADDRESS	i

14. 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 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 of 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP