

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V22739

1. Entity Name

INTERNATIONAL ENTERPRISE SERVICES, INC.

FILED

Aug 22, 2000 8:00 am
Secretary of State

08-22-2000 90013 001 ***550.00

08-22-2000 90013 002 ***550.00

Principal Place of Business

Mailing Address

P.O. BOX 4238
FT LAUDERDALE FL 33338
US

P.O. BOX 4238
FT LAUDERDALE FL 33338-4238
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3113924

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DYAL, JAMES
1401 E. BROWARD BLVD.
FT. LAUDERDALE FL 33301

Name

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

City

FL

Zip Code

8. 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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME METZGER, FRANK L.
STREET ADDRESS 1121 NE 16TH AVE.
CITY-ST-ZIP FT. LAUDERDALE FL 33304

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE STD ☐ Delete
NAME METZGER, MARY K.
STREET ADDRESS 1121 NE 16 AVE
CITY-ST-ZIP FT. LAUDERDALE FL 33304

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

6/15/00 (954) 763-4981



L. H. Fuchs
Executive Director

Attachment Doc #V28739
19809

STATE OF FLORIDA
DEPARTMENT OF REVENUE

TALLAHASSEE, FLORIDA 32399-0100

General Tax Administration
Child Support Enforcement
Property Tax Administration
Administrative Services
Information Services

AUGUST 11, 2000

INTERNATIONAL ENTERPRISES, INC.
I.E.S., INC. 05-00
P.O. BOX 4238
FORT LAUDERDALE, FL 33338-4238

CK#1012
AMT:\$550.00
SCREENER:1391

We are returning remittance (s) listed above for the following reasons, as indicated by an X.

XX Check (s) sent to the Florida Department of Revenue in error.

Unable to identify- if this remittance is for taxes administered by the Florida Department of Revenue, please enclose appropriate tax return with your tax identification number and return to the address indicated below.

If this is in payment of Federal taxes; please send to the Internal Revenue Service Center, Atlanta, Georgia 39901.

Your check or money order is not payable to the Florida Department of Revenue and/or is incomplete. Actual payment of taxes cannot be accounted for until this Department receives a correctly completed valid check or money order.

We are returning the attached documentation relating to vehicle title, registration and/or vehicle license tag. The Florida Department of Highway Safety and Motor Vehicles or the local tax collector/tag agency should be contacted. You may contact the Florida Department of Highway Safety, Title & Registration at (850) 488-3881.

Other:

Florida Department of Revenue

Return & Revenue Processing
5050 W. Tennessee Street
Tallahassee, Florida 32399-0100