

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 19, 2001 8:00 am
Secretary of State
03-19-2001 90074 007 ***158.75

DOCUMENT # 825494

1. Entity Name
AIRCRAFT SERVICE INTERNATIONAL, INC.

Principal Place of Business

1815 GRIFFIN RD.
STE 300
DANIA FL 33004

Mailing Address

ATTN: TAX/ TREASURY DEPT
1815 GRIFFIN RD. STE 300
DANIA FL 33004-2252
US

UUU26434



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **38-1844892**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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, 2001 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 ☐ Delete
NAME **PD**
STREET ADDRESS **TOWNES, STEPHEN**
CITY-ST-ZIP **1815 GRIFFIN RD STE 300**
DANIA FL 33004-2252

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

TITLE ☐ Delete
NAME **SV**
STREET ADDRESS **WATTS, GEORGE**
CITY-ST-ZIP **1815 GRIFFIN RD STE 300**
DANIA FL 33004-2252

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

TITLE ☒ Delete
NAME **V**
STREET ADDRESS **KRANE, MICHAEL**
CITY-ST-ZIP **1815 GRIFFIN RD STE 300**
DANIA FL 33004-2252

TITLE ☐ Change ☒ Addition
NAME **CFD & S.A.V.P.**
STREET ADDRESS **JEFFREY P. HARTMAN**
CITY-ST-ZIP **1815 GRIFFIN RD, STE. #300**
DANIA, FL 33004-2252

TITLE ☐ Delete
NAME **V**
STREET ADDRESS **GRANGER, KURTIS**
CITY-ST-ZIP **1815 GRIFFIN RD STE 300**
DANIA FL 33004-2252

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

TITLE ☐ Delete
NAME **V**
STREET ADDRESS **GASSETT, JOHN W.**
CITY-ST-ZIP **1221 NW 76 AVE.**
PLANTATION FL

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

TITLE ☐ Delete
NAME **V**
STREET ADDRESS **SELLAS, ROBERT D JR**
CITY-ST-ZIP **1815 GRIFFIN RD STE 300**
DANIA FL 33004-2252

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

JEFFREY P. HARTMAN

3/8/01
Date

954 926 2000
Daytime Phone #

CR2E034 (10/00)