2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 08:00 AM
Secretary of State

DOCUMENT # F98000001902

1. Entity Name
AIRCRAFT SERVICE INTERNATIONAL GROUP, INC.

Principal Place of Business	Mailing Address
201 S ORANGE AVENUE 1100 ORLANDO, FL 32801	201 S ORANGE AVENUE 1100 ORLANDO, FL 32801 US

04212004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0822351
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000136841
04/28/04-80101-012 150.00

10. OFFICERS AND DIRECTORS

TITLE	PCEO
NAME	RYAN, KEITH P
STREET ADDRESS	1825 LAKE ROBERTS COURT
CITY-ST-ZIP	WINDERMERE, FL 34786
TITLE	S
NAME	MURRER, GREOGORY J
STREET ADDRESS	5 POWDERHOUSE LN
CITY-ST-ZIP	BOXFORD, MA 01921
TITLE	AS
NAME	GOLDSTEIN, JOSEPH I
STREET ADDRESS	9169 BAY HILL BLVD
CITY-ST-ZIP	ORLANDO, FL 32819
TITLE	CFVT
NAME	HARTMAN, JEFFREY P
STREET ADDRESS	488 MISTY LANE
CITY-ST-ZIP	WINTER PARK, FL 32789
TITLE	D
NAME	MURRER, GREGORY J
STREET ADDRESS	5 POWDERHOUSE LN
CITY-ST-ZIP	BOXFORD, MA 01921
TITLE	D
NAME	FRESE, ROBERT
STREET ADDRESS	1125 LAKE SHADOW CIR 5-202
CITY-ST-ZIP	MAITLAND, FL 32751

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12. 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 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] Joseph I. Goldstein Asst. Secretary 4/22/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #