

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2001 8:00 am
Secretary of State

03-05-2001 90325 039 \*\*\*158.75

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1. Entity Name
AERO CAPITAL CORPORATION

Principal Place of Business
11780 US HWY ONE, #300
N PALM BEACH FL 33408

Mailing Address
11780 US HWY ONE, #300
N PALM BEACH FL 33408

2. Principal Place of Business
21 DUNBAR Rd.

3. Mailing Address
21 DUNBAR RD



DO NOT WRITE IN THIS SPACE

City & State
PALM BEACH GARDENS, FL

4. FEI Number
Applied For
Not Applicable

Zip
33418
Country
PALM BEACH

5. Certificate of Status Desired
\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
FHS CORPORATE SERVICES, INC.
21 DUNBAR RD
PALM BEACH GARDENS FL 33418

7. Name and Address of New Registered Agent
Name
MARTIN MAY
Street Address (P.O. Box Number is Not Acceptable)
21 DUNBAR ROAD
PALM BEACH GARDENS FL 33418

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
MARTIN MAY
Signature, typed or printed name of registered agent and title if applicable.
(MAY)
Date
2/21/01
(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
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

Table with 11 columns: OFFICERS AND DIRECTORS. Columns include Title, Name, Street Address, City-ST-ZIP, and a Delete checkbox.

Table with 12 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. Columns include Title, Name, Street Address, City-ST-ZIP, Change checkbox, and Addition checkbox.

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:
MARTIN MAY
Signature and typed or printed name of signing officer or director
Date: 2/21/01
Daytime Phone #: 561-622-3636

CR2E034 (10/00)