FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

P96000003219 (8)

AIR GORDON, INC.

FILED Mar 13 1998 8:00am Secretary of State



Principal Plac	ce of Business	Mailing Address		1 (PB)/D6) (UE (B)(U B)(U 60(U) 60(U 60)(U 50(U) 90	B188 30118 11881 01818 1811 1881
3709 TREE LINE BLVD		3709 TREE LINE BLVD			
MELBOURNE FL 32935		MELBOURNE FL 32935		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	, or voc
				01/08/1996	
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 1948 These DR		26 1948 Thes & Dir.		59-3356935	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		e. Continuate of otatus besided	Fee Required
City & Stat		City & State 28 VIERN FC	-	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	
24 32941		29 32940 30	BREVARIL	Personal Property Tax due June 30.	Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent VANAGE IA CORDON D 81 Name					
VANAȘELJA, GORDON R					
			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
MELBOURNE FL 32935			63 1948	Thesy UR	
			63		
			84 City . F. R	₽ <i>P</i> FL	85 Zip Code 32940
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE STATE GORdon R. VANSEL B SIGNATURE STATE (Synord or printed name of register of april ledic if april lead by (NOTE: Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	DPS	☐ DELETE	1.1 TITLE		Change
NAME	VANASELJA, GORDON R		1.2 NAME		· '
STREET ADDRESS	\$709 TREE LINE BLVD		1.3 STREET ADDRESS	1948 These DR_	E
CITY-ST-ZIP	MELBOURNE FL		1.4 CITY-ST-ZIP	1948 THESY DR VIERA, FL. 3294	
TETLE	VP	☐ DELETE	2.1 TITLE		Change Addition
NAME	vanaselja, donna H.		2.2 NAME		
STREET ADDRESS	3709 TREE LINE BLVD.		2.3 STREET ADDRESS /	946 Thest DR VIERA FL. 32940	
CITY-ST-ZIP	MELBOURNE FL		2. 4 CITY-ST-2IP	VIERA FL. 32740	
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		=
TITLE		☐ DELET e	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CiTY - ST - ZIP		
TITLE		☐ DELET E	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

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 or 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. GORDON R.