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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000014282

AAA DEPENDABLE AIR, INC.

Principal Place of Business

Mailing Address

14 NE 9 AVE DEERFIELD BEACH FL 33441

2. Principal Place of Business 7667 W. Som

> GENOUNE, MEIR 14 NE 9 AVE

DEERFIELD BEACH FL 33441

14 NE 9 AVE

2a. Mailing Address

City & State DELFRY

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Droward

9. Name and Address of Current Registered Agent

DEERFIELD BEACH FL 33

10792 EL Suite, Apt. #, etc.

FILED Mar 02, 1999 8:00 am **Secretary of State**

03-02-1999 90166 012 ***158.75



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Zip Code

1441									
		,	DO NOT WRITE IN THIS SPACE						
			3. Date Incorporated or Qualifed	-					
			02/15/1996						
			4. FEI Number	$\prod I$	Applied For				
CABA	//	o Ct	65-0645662	\prod_{i}	Not Applicable				
		_		\$8.75 Additional Fee Required					
0 1			6. Election Campaign Financing	\$5.00 May Be					
SEACH -			Trust Fund Contribution						
Count	try	Beach	8. This corporation owes the current year Intangil Personal Property Tax.	ble Yes	□No				
	10. Name and Address of New Registered Agent								
	81	Name							
1	B2	Street Addres	ss (P.O. Box Number is Not Acceptable)						

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.

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84 City

SIGNATURE		MOTE Day	ate at 8 and signature	aguired when rejectation)	DATE	}				
Signature, types of printed name of registered again, and the mapping of the signature of t										
12.	OFFICERS AND DIRECTORS		13.			Addition				
TITLE	- TU	DELETE	1.1 TITLE	DID MEIR	Change					
NAME	GENOUNE, MEIR		1.2 NAME	CENORICE CARALL	o coult	1				
STREET ADDRESS	14 NE 9 AVE		1.3 STREET ADDRESS	DI GENOUNE MEIR 10792 EL CABALL DELRAY BEALH, FO	2 32////					
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	_	1.4 CITY-ST-ZIP	DELERY BEREN, F.	2 55446					
TITLE		DELETE	2.1 TITLE		☐ Change	☐ Addition				
NAME			22 NAME							
STREET ADDRESS			2.3 STREET ADDRESS			ŀ				
CITY-ST-ZIP			2. 4 CiTY-ST-ZiP							
TITLE		DELETE	3.1 TITLE		☐ Change	☐ Addition				
NAME		1	3.2 NAME							
STREET ADDRESS	·		3.3 STREET ADDRESS							
CITY-ST-ZIP			3.4. CITY-ST-ZIP							
TITLE		DELETE	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			1				
STREET ADDRESS			5.3 STREET ADDRESS			Ì				
CITY-ST-ZIP			5.4 CITY-ST-ZIP							
TITLE		DELETE	6.1 TITLE		☐ Change	Addition				
NAME			6.2 NAME							
STREET ADDRESS			6.3 STREET ADDRESS							
CITY-ST-ZIP			6.4 CITY-ST-ZIP		1.5 II					

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, with all other like empowered.