

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

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May 02 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000062180 (0)

1. Corporation Name
AIR TRENDS INTERNATIONAL, INC.

Principal Place of Business 14560 SOUTH MILITARY TRAIL #B5 DELRAY BEACH FL 33445	Mailing Address 14560 SOUTH MILITARY TRAIL #B5 DELRAY BEACH FL 33484-3729
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2. Principal Place of Business 21 18343 NE 4th Court Suite, Apt. #, etc.		2a. Mailing Address 26 18343 NE 4th Court Suite, Apt. #, etc.		3. Date Incorporated or Qualified 07/23/1996		3a. Date of Last Report	
22 City & State 23 Miami, FL Zip Country 24 33179 25 USA		27 City & State 28 Miami, FL Zip Country 29 33179 30 USA		4. FEI Number 65-0690041		Applied For Not Applicable	
				5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			

9. Name and Address of Current Registered Agent SISSOM, DAVID 210 174TH STREET #1003 NORTH MIAMI BEACH FL 33160				10. Name and Address of New Registered Agent			
				81 Name SISSOM, DAVID			
				82 Street Address (P.O. Box Number is Not Acceptable) 6929 Town Harbor Blvd			
				83 Apt. #723			
				84 City Boca Raton			
				85 Zip Code FL 33433			

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SISSOM, DAVID 210 174TH STREET #1003 NORTH MIAMI BEACH FL 33160 ☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	☒ Change ☐ Addition SISSOM, DAVID 6929 Town Harbor Blvd. Apt. #723 Boca Raton, FL 33433
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SISSOM, LINDA 7210 NORTH NEBRO ROAD MUNCIE IN 47304 ☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	☐ Change ☐ Addition

14. I do 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.

SIGNATURE: _____ **4/15/97** **(305) 650-9100**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)