

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2002 8:00 am
Secretary of State

03-14-2002 90333 001 ***308.75

DOCUMENT # 252500

1. Entity Name

AERO KOOL CORPORATION

Principal Place of Business

1495 S.E. 10 AVENUE
HIALEAH FL 33010-5984

Mailing Address

1495 S.E. 10 AVENUE
HIALEAH FL 33010-5984


DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1495 SE 10th Ave

3. Mailing Address

(same)

Suite, Apt. #, etc.

Hialeah, FL

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-0941233**

Applet

Not Ap

Zip

33010

Country

USA

Zip

Country

5. Certificate of Status Desired


\$8.75 Addition
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GREGOR, THEODORE H.
1495 S.E. 10 AVE
HIALEAH FL 33010

Name -

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

 9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐
FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

 10. Election Campaign Financing
 Trust Fund Contribution. ☐
\$5.00 M
Added to F

11.

OFFICERS AND DIRECTORS

TITLE	PD	☐ Delete
NAME	GREGOR, THEODORE H.	
STREET ADDRESS	9400 SW 61 COURT	
CITY - ST - ZIP	PINECREST FL 33156	
TITLE	S	☐ Delete
NAME	GREGOR, ALKMINI	
STREET ADDRESS	9400 SW 61 COURT	
CITY - ST - ZIP	PINECREST FL 33156	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN

TITLE		☐ Change ☐
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ Change ☐
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ Change ☐
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ Change ☐
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ Change ☐
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

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 changed, or on an attachment with an address, with all other like employment.

SIGNATURE:

Theodore H. Gregor
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

4-1-02