

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

FILED
May 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 391201 (1)
1. Corporation Name
INTERAIR PARTS-MIAMI, INC.

Principal Place of Business
950 SE 12TH STREET
HIALEAH FL 33010

Mailing Address
950 SE 12TH STREET
HIALEAH FL 33010



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/11/1971	
21	Suite, Apt #, etc.	26	Suite, Apt #, etc.	4. FEI Number 59-1364606	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent HENRICKSON, MICHAEL R 950 SE 12TH STREET HIALEAH FL 33010		10. Name and Address of New Registered Agent	
		81 Name	POLK, RHONDA S.
		82 Street Address (P.O. Box Number is Not Acceptable)	950 S.E. 12th STREET
		83	
		84 City	HIALEAH FL
		85 Zip Code	33010

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 *Rhonda S. Polk, Asst. Secretary* 5/6/98
Signature typed or printed name of registered agent and title (Applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DS <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BATCHELOR, MARIANNE	1.2 NAME	
STREET ADDRESS	950 S. E. 12 ST.	1.3 STREET ADDRESS	
CITY-ST-ZIP	HIALEAH FL	1.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WALKER, RAYMOND S.	2.2 NAME	
STREET ADDRESS	950 SE 12TH ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	HIALEAH FL	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FERRARESI, DANIEL J	3.2 NAME	
STREET ADDRESS	950 SE 12TH ST	3.3 STREET ADDRESS	
CITY-ST-ZIP	HIALEAH FL	3.4 CITY-ST-ZIP	
TITLE	AS <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAWSON, HUMPHREY	4.2 NAME	
STREET ADDRESS	950 SE 12TH ST	4.3 STREET ADDRESS	
CITY-ST-ZIP	HIALEAH FL	4.4 CITY-ST-ZIP	
TITLE	V <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MESECHER, BOYD, D	5.2 NAME	SIMKOVITZ, LEONARD
STREET ADDRESS	950 SE 12TH ST	5.3 STREET ADDRESS	950 SE. 12th STREET
CITY-ST-ZIP	HIALEAH FL	5.4 CITY-ST-ZIP	HIALEAH, FL
TITLE	DCP <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BATCHELOR, GEORGE	6.2 NAME	SEE ATTACHED
STREET ADDRESS	950 SE 12 ST	6.3 STREET ADDRESS	SHEET FOR ADDITIONAL
CITY-ST-ZIP	HIALEAH FL	6.4 CITY-ST-ZIP	OFFICERS

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.

SIGNATURE: *Rhonda S. Polk, Asst. Secretary* 4/15/98 (305) 889-6222

CR2E034 (10/97)