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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 426511 (2)

1. Corporation Name

AIR MARINE SALES, INC.



Principal Place of Business

3400 LILLIAN DR
TITUSVILLE FL 32780

Mailing Address

3400 LILLIAN DR
TITUSVILLE FL 32780

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

SCOPELITIS, ROBERT J.
3400 LILLIAN BLVD
TITUSVILLE FL 32780

81 Name

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

83

84 City

FL 85 Zip Code

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

Signature, typed or printed name of registered agent and the corporation

IN THE Registered Agent's presence, I have signed this

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
D	SCOPELITIS, STEPHEN G.	3060 DAIRY ROAD	TITUSVILLE FL	☐
PD	SCOPELITIS, ROBERT J.	3060 DAIRY ROAD	TITUSVILLE FL	☐
				☐
				☐
				☐
				☐

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE	Change	Addition
11				☐	☐	☐
12				☐	☐	☐
13				☐	☐	☐
14				☐	☐	☐
21				☐	☐	☐
22				☐	☐	☐
23				☐	☐	☐
24				☐	☐	☐
31				☐	☐	☐
32				☐	☐	☐
33				☐	☐	☐
34				☐	☐	☐
41				☐	☐	☐
42				☐	☐	☐
43				☐	☐	☐
44				☐	☐	☐
51				☐	☐	☐
52				☐	☐	☐
53				☐	☐	☐
54				☐	☐	☐
61				☐	☐	☐
62				☐	☐	☐
63				☐	☐	☐
64				☐	☐	☐

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/96

CR2E034 (12/95)