2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000007323

BUHL, TIMOTHY

VERO BEACH, FL 32963

9019 SOMERSET BAY LANE, #301

Name:

Address:

City-St-Zip:

Entity Name: AERCO INTERNATIONAL, INC

FILED Feb 04, 2005 Secretary of State

Current P	rincinal Place	e of Business:	New Principal Place	of Rusiness
	IERSET BAY L		New Fillicipal Flace	e of Busiliess.
	ACH, FL 3296			
Current Mailing Address:			New Mailing Address:	
	IERSET BAY L ACH, FL 3296			
FEI Number:	: 22-2057141	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)
Name and	l Address of (Current Registered Agent:	Name and Address	of New Registered Agent:
	, KENNETH A EDERAL HIGH FL 34994 U	ESQ HWAY, 4TH FLOOR JS		
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both
SIGNATUF	RE:			
	Electron	nic Signature of Registered Ag	ent	Date
Election Car	mpaign Financin	g Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
Title: Name: Address: City-St-Zip:	P (DEPUY, FRED 159 PARIS AVI NOTHVALE, N		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VP (RUBIN, LARRY 159 PARIS AVI NORTHVALE, N	ENUE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	ST (ABRAHAMSEN 159 PARIS AVI NORTHVALE, N	ENUE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D (HISHMEH, BAS 10 MORGAN C MONTVALE, N	OURT	Title: Name: Address: City-St-Zip:	() Change () Addition
Title [.]	D () Delete	Title:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: TIMOTHY R. BUHL D 02/04/2005