

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 06, 2000 08:00 AM
Secretary of State

DOCUMENT # F98000005503

1. Entity Name
AEROTHROST CORPORATION

Principal Place of Business 5300 N.W. 36TH STREET MIAMI FL 33152	Mailing Address ATTN: CHARLES A MORSBACH PO BOX 522236 MIAMI FL 331522236
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2. Principal Place of Business 5300 N.W. 36TH STREET	3. Mailing Address ATTN: CHARLES A MORSBACH
Suite, Apt. #, etc.	Suite, Apt. #, etc. PO BOX 522236

City & State MIAMI FL	City & State MIAMI FL
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4. FEI Number 65-0848010	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>

Zip 33122	Country	Zip 33152	Country
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MORSBACH CHARLES A
 5300 NW 36TH ST
 MIAMI FL 33122

7. Name and Address of New Registered Agent

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 **CHARLES A. MORSBACH**

04/06/2000

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, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SHIR MICHAEL 5300 N.W. 36TH ST MIAMI FL 33122	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SAX SAMUEL 5300 N.W. 36TH ST MIAMI FL 33122	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC PERSSON CHRISTER 1800 DIAGANOL RD STE 230 ALEXANDRIA VA 22314	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KALHIL FARYT 5300 N.W. 36TH ST MIAMI FL 33122	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS MORSBACH CHARLES A 5300 N.W. 36TH ST MIAMI FL 33122	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MCMILLEN JAMES E 5300 N.W. 36TH ST MIAMI FL 33122	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SAX SAMUEL D 5300 N.W. 36TH ST MIAMI FL 33122	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC PERSSON CHRISTER 1800 DIAGONAL RD STE 230 ALEXANDRIA VA 22314	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Charles A. Morsbach

VS 04/06/2000

JOHN W LOWE JR V
5300 NW 36TH ST

MIAMI FL 33122

THOMAS A JOHNSON V
5300 NW 36TH ST

MIAMI FL 33122

MARIA E HERNANDEZ V
5300 NW 36TH ST

MIAMI FL 33122

ANTHONY E COULSON V
5300 NW 36TH ST

MIAMI FL 33122

LEON E RING D
2202 CRYSTAL SPRING LN

HERMITAGE TN 37076