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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **H29248**

1. Corporation Name

AIR & ENERGY SERVICES, INC.

Principal Plac	e of Business	Mailir	ng Address) (00:01: 91(\$ (10:0)B:(0):E() 0150) (0):		
14900 S.W. 86TH AVENUE		14900 S.W. 86TH AVENUE								
MIAMI FL 33158		MIAMI FL 33158			DO NOT WRITE IN THIS SPACE					
							3.	Date Incorporated or Qualifed		
								11/04/1984		{
2. Principal P	lace of Business	2a. M	ailing Address				4.	FEI Number	Ap	plied For
21		26	J					NOT APPLICABLE	No	t Applicable
Suite, Apt.	#, etc.		uite, Apt. #, etc.						\$8.75 /	Additional
22		27						Certificate of Status Desired	Fee Re	quired
City & Stat	е	С	ity & State				6.	Election Campaign Financing	\$5.00	May Be
23		28						Trust Fund Contribution	Added t	to Fees
Zíp	Country	Zi	p	Coul	ntry		- 1	This corporation owes the current year		
24	25	29		30				Personal Property Tax.	Yes	□No
 	9. Name and Address of Currer	t Register	ed Agent		81	Name	10.	Name and Address of New Registere	d Agent	
ΔGI	IILAR, APOLINAR, JR.				۰۰	Name				
	00 S.W. 86TH AVENUE				82	Street Addr	ress (P.	O. Box Number is Not Acceptable)	· · · · · ·	
	Mi FL 33158									
HIC	WITE 00100				83					
					84	City			85 Zip (Code
								F		rogistered
11. Pursuant office or r	to the provisions of Sections 607.050 registered agent, or both, in the State	2 and 607. of Florida.	.1508, Florida Statu Such change was a	tes, the at outhorized	ove by	e-named corp the corporation	oration on's bo	submits this statement for the purpose and of directors. I hereby accept the app	oi changing its jointment as re	gistered
agent. I a	m familiar with, and accept the obliga	tions of, Se	ection 607.0505, Flo	rida Statı	ites					
SIGNATURE							1	pinstating) DATE		{
12	Signature, typed or printed name of registered ages OFFICERS AN			: Registered	Agen	t signature require		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	DRS IN 12
TITLE	DP OFFICERS AN	DINLOT	☐ DELETE	1,1 TIT	LE			3511.0.10.01.01.020	Change	Addition
NAME	AGUILAR, APOLINAR, JR.			1.2 NA						_
STREET ADDRESS	14000 C M OCTH AME					ADDRESS				
	MIAMI FL			1.4 CIT		Ĭ				
CITY-ST-ZIP TITLE	DV		☐ DELETE	2.1 711		1-211			☐ Change	Addition
NAME	ROSALINA, RAMOS AGUILAR			2.2 NA						
STREET ADDRESS	44000 CM OCTU AVENUE					ADDRESS	•			}
	MIAMI FL			2. 4 CI						
CITY-ST-ZIP TITLE			☐ DELETE	3.1 TIT		11-4411			☐ Change	☐ Addition
NAME				3.2 NA	ME					1
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP				3.4. CI						
TITLE			☐ DELETE	4.1 TIT				,	Change	☐ Addition
NAME				4. 2 N	ME					
STREET ADDRESS						ADORESS				
CITY-ST-ZIP		·		4.4 CI						ļ
TITLE					IY-81	-		•		
NAME			☐ DELETE	5.1 TIT		Į.	<u></u>		Change	☐ Addition [
			☐ DELETE		ΣE		···		Change	Addition
			☐ DELETE	5.1 TIT 5.2 NA	ME ME	ADDRESS			☐ Change	☐ Addition
STREET ADDRESS			☐ DELETE	5.1 TIT 5.2 NA	le Me Reet				Change	Addition
			☐ DELETE	5.1 TIT 5.2 NA 5.3 ST	LE ME REET TY-S1				☐ Change	Addition Addition
STREET ADDRESS CITY-ST-ZIP				5.1 TIT 5.2 NA 5.3 ST 5.4 CIT	LE ME REET TY-ST					

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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP