

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

00 MAY -1 AM 3:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J52899

(8)

1. Corporation Name

AERTECH, INC.

Principal Place of Business

**% DAVID W. WILCOX
P.O. BOX 14072
BRADENTON FL 34280**

Mailing Address

**% DAVID W. WILCOX
P.O. BOX 14072
BRADENTON FL 34280**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 3a. Date of Last Report

01/15/1987

10/05/1994

4. FEI Number

59-2760948

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. # etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. # etc.

27

City & State

28

Zip

Country

9. Name and Address of Current Registered Agent

**GRAY, ANDREA
1313 63RD ST W
BRADENTON FL 34209**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

SIGNATURE

(Signature of Registered Agent or Registered Agent's Representative)

(Signature of Registered Agent or Registered Agent's Representative)

DATE

12. OFFICERS AND DIRECTORS

12a

NAME

STREET ADDRESS

CITY, ST, ZIP

**PST
DUBUC, DON
1313 63RD ST W
BRADENTON FL**

12b

NAME

STREET ADDRESS

CITY, ST, ZIP

12c

NAME

STREET ADDRESS

CITY, ST, ZIP

12d

NAME

STREET ADDRESS

CITY, ST, ZIP

12e

NAME

STREET ADDRESS

CITY, ST, ZIP

12f

NAME

STREET ADDRESS

CITY, ST, ZIP

12g

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13a

NAME

STREET ADDRESS

CITY, ST, ZIP

☐ Change ☐ Addition

13b

NAME

STREET ADDRESS

CITY, ST, ZIP

☐ Change ☐ Addition

13c

NAME

STREET ADDRESS

CITY, ST, ZIP

☐ Change ☐ Addition

13d

NAME

STREET ADDRESS

CITY, ST, ZIP

☐ Change ☐ Addition

13e

NAME

STREET ADDRESS

CITY, ST, ZIP

☐ Change ☐ Addition

13f

NAME

STREET ADDRESS

CITY, ST, ZIP

☐ Change ☐ Addition

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 199.032(1)(b), Florida Statutes. I further certify that the information is not and will not be used for any purpose other than to provide information to the public 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 make this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an affidavit.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-95

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