## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K05121

AIR TIGHT INC.

(4)

## **FILED** May 02 1997 8:00am Secretary of State



**:											
Principal Place of Business Mailing Address										1811 <b>4161 61611 618</b> 11	OIBIL IBBL
711 BAYSHORE DR 202 711 BAYSHORE DR 202											
FORT LAUDER	DALE FL 33304	FOF	FORT LAUDERDALE FL 33304-3964								
,							3	<ul> <li>Date Incorporated or Qualifie 12/03/1987</li> </ul>		Date of Last R 07/24/1996	eport
2. Principal Place of Business			2a. Mading Address				4	4. FEI Number Applied For			
21		26	0.74					65-0203617			t Applicable
Sulte, Apt.	#, <b>⊖</b> IC.	27	Suite, Apt. #, etc.				5	5. Certificate of Status Desired See Required \$8.75 Additional Fee Required			
City & State			City & State				6	6. Election Campaign Financing \$5.00 May Be			
23		28	I — I — — — — — — — — — — — — — — — — —					Trust Fund Contribution Added to Fees			
Zip	Country	_ <u> </u>	Zip Country			8	8. This corporation has liability for intangible tax under s. 199.032,				
24	25 29 30				Florida Statutes Yes No						
	9, Name and Address of Curi	rent Registe	ered Agent		1	A.L.	10	). Name and Address of New	Register	ed Agent	
PER	RY, WILLIAM G.				81	Name					1
711 BAYSHORE DRIVE #202 FORT LAUDERDALE FL 33305						Street A	ddress i	dress (P.O. Box Number is Not Acceptable)			
FOR	II ENODENDALL I C 00000				83						
					84	City			E	85 Zip (	Code
11 Pureuant	to the provisions of Sections 607.0	1502 and 60	7 1508 Florida Statu	tes the a	hove	e-named c	cornorati	ion submits this statement for th			s registered
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 little if applicable (NOTE Registered Agent signature required when reinstating)  DATE											
12.	OFFICERS A			13.	- Age		equired with	ADDITIONS/CHANGES TO OF		•	S IN 12
TITLE	PST		DELETE	1.1 1	TLE	T		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Change	Addition
NAME	PERRY, WILLIAM G.			1.2 N	AME						
STREET ADDRESS	711 BAYSHORE DRIVE #20	2		1.3 S	TREE 1	ADORESS					
CITY-ST-ZIP	FORT LAUDERDALE FL				11Y - S						
TITLE	VO		DELETE	2.1 1						Change	Addition
NAME	PERRY, WILLIAM G.			2.2 N	AME						
STREET ADDRESS	711 BAYSHORE DRIVE #20	2		2.3 \$	TREET	ADDRESS					
CITY-ST-ZIP	FORT LAUDERDALE FL			2 4 0	OTY - S	ST-ZIP					
TITLE	****		DELETE	31 T	TLE					Change	☐ Addition
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CITY-ST-ZIP				3.4. 0	OTY-S	ST-ZIP		<u> </u>	· · · · · · · · · · · · · · · · · · ·		
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NAME				4.21	IAME						
STREET ADDRESS				4.3 S	TREET	ADDRESS					
CITY-ST-ZIP				4.4 G	ITY-S	T-ZIP					
TITLE			☐ DELETE	5.1 T	ITLE					☐ Change	☐ Addition
NAME				5.2 N	AME						
STREET ADDRESS				5.3 S	TREET	ADDRESS					
CITY-ST-ZIP			· · · · · · · · · · · · · · · · · · ·		ITY-S	T-ZIP					
TITLE			☐ DELETE	6.1 T	ITLE					Change	Addition
NAME				6.2 N							
STREET ADDRESS				6.3 S	TREET	ADDRESS					
CITY-ST-ZIP	by certify that the information supp	V 3 3 3 3 3 3 4 3 4 4 4 4 4 4 4 4 4 4 4	. (1)	6.40	ITY-S	1 - ZIP		Seellen 440 07/31/3 Florida Otal	uton I fi	thos portifu that	the
14. I do herek	by certify that the information subb	nied with thi	s ming does not qual	my tor the	exe	mpuon sta	aieo in S	section Trialuz(3)(1), Florida Stat	ules. 1 IU	roler centry that	บเซ

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 ottachment with an ageness.