**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # K05121

1. Corporation Name AIR TIGHT INC

STREET ADDRESS

## **FILED** Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90242 011 \*\*\*150.00

Alli Hai	11 1100								
Principal Plac	e of Business	Mailing Address			-		11811 <b>616</b> 11	#### <b>##</b> ##	A1 6161 (66)
711 BAYSHORE		711 BAYSHORE DR 202							
FORT LAUDERDALE FL 33304 FORT LAUDERDALE FL 33304						DO NOT WRITE IN THIS	S S D A C E		
						3. Date Incorporated or Qualifed	SPACE	-	
						12/03/1987			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	Applied For		
21 26						65-0203617	Not Applicable		
Suite, Apt. #, etcSuite, Apt. #, etc			~			5: Certifcate of Status Desired	= \$8.75-Additional		1
27						5. Cellicate of otatos pession	F	e Req	uired
City & State City & State						6. Election Campaign Financing			May Be
23	28					Trust Fund Contribution		ded to	Fees
Zip	Country	Zip	Counti	у		8. This corporation owes the current year In	tangible Yes⊟	. г	⊐No I
24	25	29	30			Personal Property Tax.  10. Name and Address of New Registered			_110
	9. Name and Address of Curre	ent Registered Agent	8	1 Na		IU. Hattie and Address of New Neglisteles	. 194116		
PFR	RY, WILLIAM G.								
711 BAYSHORE DRIVE #202				2 Str	et Addre	ss (P.O. Box Number is Not Acceptable)			
	T LAUDERDALE FL 33305		8	3	<del></del>				
,			Ľ						
			8	4 Cit	/	FI.	85	Zip Co	ode
SIGNATURE	Signature, typed or printed name of registered a	AND DIRECTORS	Registered Ag	ent signa	ture required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A			
TITLE	PST	☐ DELETE	1.1 TITLE				Ch	ange	☐ Addition
NAME	PERRY, WILLIAM G.		1.2 NAME						
STREET ADDRESS			1.3 STRE	1.3 STREET ADDRESS					1
CITY-ST-ZIP	FORT LAUDERDALE FL		1.4 CITY-ST-ZIP				∏ Ch:	anna	Addition
TITLE	VD	☐ DELETE	2.1 TITLE		l			inge	
NAME	PERRY, WILLIAM G.		2.2 NAME						
STREET ADDRESS			2.3 STRE		ESS				
CITY-ST-ZIP	<u> </u>			2 4 CITY-ST-ZIP 3.1 TITLE			Ch	ange	Addition
TITLE			3.2 NAME				_		
NAME			3.3 STRE		FSS				
STREET ADDRESS			3.4. CITY						
CITY-ST-ZIP		☐ DELETE	4.1 TITLE			·	Ch	ange	☐ Addition
NAME		<del>-</del> -	4. 2 NAM	E		,			
STREET ADDRESS			4.3 STRE		ESS				
CITY-ST-ZIP			4.4 CITY						
TITLE		☐ DELETE	5.1 TITLE		$\neg$		Ch	ange	☐ Addition
NAME			5.2 NAM	<b>=</b>					
STREET ADDRESS	6		53 STRE	ET ADDR	ESS				
CITY-ST-ZIP			5.4 CITY-						
TITLE		☐ DELETÉ	61 TITLE				☐ Ch	ange	Addition
NAME	1				l l				
NAVIC			6.3 STRE						

6.4 CITY-ST-ZIP CITY-ST-ZIP 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.