DOCUMENT # K19139 (0) AHO AIR, INC.  Princes Page of Bashess 1750 October, AVE WALK ECKOP F1 3905  2. Princes Page of Bashess 1750 October, AVE WALK ECKOP F1 3905  2. Princes Page of Business 2. Princes Page of Business 2. Princes Page of Business 2. Princess 2. Main Coccopy AVE WALK ECKOP F1 3905  3. Page inconjected or Custifical 3a. Date of Last Reject OCY2 1995  5. The inconjected or Custifical 3a. Date of Last Reject OCY2 1995  5. The inconjected or Custifical 3a. Date of Last Reject OCY2 1995  5. The inconjected or Custifical 3a. Date of Last Reject OCY2 1995  5. The inconjected or Custifical 3a. Date of Last Reject OCY2 1995  5. The inconjected or Custifical 3a. Date of Last Reject OCY2 1995  5. The inconjected or Custifical 3a. Date of Last Reject OCY2 1995  5. The inconjected or Custifical 3a. Date of Last Reject OCY2 1995  5. The inconjected or Custifical 3a. Date of Last Reject OCY2 1995  5. The inconjected or Custifical 3a. Date of Last Reject OCY2 1995  5. The inconjected or Custifical 3a. Date of Last Reject OCY2 1995  5. The inconjected or Custifical 3a. Date of Last Reject OCY2 1995  5. The inconjected or Custifical 3a. Date of Last Reject OCY2 1995  5. The inconjected or Custifical 3a. Date of Last Reject OCY2 1995  5. The inconjected or Custifical 3a. Date of Last Reject OCY2 1995  5. The inconjected or Custifical 3a. Date of Last Reject OCY2 1995  5. The inconjected or Custifical 3a. Date of Last Reject OCY2 1995  5. The inconject Reject OCY3		PATION REPORT 96			B Mortham ary of State				
Principal Place of Bulaness		ENT#	<19139	(0)					
TISO GEORGIA ANE W PALM BEACH FL 33405 US  170 GEORGIA ANE W PALM BEACH FL 33405 US  2. Principal Place of Dusiness 2. A Making Address 2. Suite, Apt. 9, etc. 3. Suite, Apt. 9, etc. 3	AHO AIR,	INC.							
710 GEORGIA AVE   W PALM BEACH R. 2905   39. Date of Class Finance   39. Date of Cla	Principal Place of Bu	usiness		ing Address					
1.	7130 GEORGIA AV W PALM BEACH F	Æ	71	30 GEORGIA AVE	405				
2.   Multips Address   2.   Multips Address   3.   September   3.   Application   5.   September   5.   Se	US								
Suite, April 4, etc.    Suite, April 4, etc.   Suite   Suite, Ager A, etc.   Suite, Ager A, etc.   Suite   Sui		f Business	<b>├</b> ─	Mailing Address			4. FEI Number	02/2	Applied For
Coy & State	Suite, Apt. #, etc.			Suite, Apt. #, etc.		*		<b>\$</b>	8.75 Additional
Zp	Crty & State			ity & State	<del>_</del>		6. Election Campaign Financing		
25   29   30	Zip	h		ip	Country	<del></del>			Added to Fees
AHO, GLENN W.  16153 88 ST N  LOXAHATCHEE FL 33470  82   Street Address (P.O. Box Number is Not Acceptable)  83   Street Address (P.O. Box Number is Not Acceptable)  84   City				red Agent	30		Florida Statutes 📝 Yes	. □ No	
16153 88 ST N	AHO. GLENN	I W.			Ĺ				
11. Fursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes. Una above named comparation's plas statutement for the purpose of changing its registered differential within and accept the obligations of Section 607,0502. Florida Statutes. Statute of Florida Such change was authorized by the comparation's board of directors. I hereby accept the appointment has registered algent. Fernital Statutes.  SIGNATURE  Signature hose to emised name of large seven agent and state in expension.  BCIT. Registered Agent of directors. I hereby accept the appointment has registered algent. Fernital Statutes. Statutes and the provision of the seven agent and state in expension.  BCIT. Registered Agent of directors. I hereby accept the appointment has registered algent. Fernital Statutes and the registered algent. Fernital Statutes are registered algent. Fernital statutes and the registered algent. Fernital statutes are registered algent. Fernital statutes and the registered algent. Fernital statutes are registered algent. Fernital statutes are registered of directors. I hereby accept the appointment has registered algent. Fernital statutes and the registered algent. Fernital statutes are registered algen	16153 68 ST	N				Street Add	ress (P.O. Box Number is Not Acceptat	ole)	
## PL B 25 OWN  The provisions of Sections 607,0502 and 607.1508, Florida Statutes. The above named corporation submiss this statement for the purpose of change das explosived office familiar with, and accept the obligations of Section 607.0505, Ferica Statutes  ## SIGNATURE    Signature   Determined name of large present addition appears and state of produces. The provision of descripts. The purpose of change das registered agent, and state of produces to provide a submiss that is registered agent. Here    12.	LOWINIOR	EE FE 334/0				City			7.0.1
SIGNATURE   System (high and accept the obligations of, Section 607,0506, Florida Statutes   Signature (high and accept the obligations of, Section 607,0506, Florida Statutes   Signature (high and accept the obligations of agreement and the of large event agreement and the obligation of product are of large event agreement and the obligation of product are of large event agreement and the obligation of product are of large event agreement and the obligation of products are of large event agreement and the obligation of products are of large event agreement and the obligation of products are of large event agreement and the obligation of products are of large event agreement and the obligation of products are obligation of products and obl	11. Pursuant to the	provisions of Sect	ions 607.0502 and 607.1	508, Florida Statute			ration submits this statement for the rou	<u> </u>	
Superior in processing agree and size is expression.   Both Fresholder Agree agree and received any   OATE	familiar with, and	ent, or both, in the diaccept the oblig	e State of Florida. Such of ations of, Section 607.05	hange was authorize 05, Florida Statutes.	d by the corp	oration's boa	rd of directors. I hereby accept the app	ointment as regis	tered agent. I am
Change	Signature					f signature require			
Change	TITLE DP	P	DI FIOLIS AND DIRECTO				ADDITIONS/CHANGES TO OFF		CTORS IN 12
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NAME		ke worth fl	· · · · · · · · · · · · · · · · · · ·			ļ			
STREET ADDRESS   33 STREET ADDRESS   34 CITY-ST-ZIP	ì			DELETE		Ì		☐ Cha	nge Addition
CITY-ST-ZP					•	ADDRESS			İ
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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 logal effect as it made under	NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			☐ DELETE	6 1 TITLE 6 2 NAME 6.3 STREET	ODRESS		☐ Cha	nge 🗋 Addition
appears in Block 12 or Block 13 if chapped, or on an attachment with an address.	NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SY-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP 14. I do hereby certify that the infocath; that I am an	ormation indicated officer or directo	o on this annual report or r of the corporation or the	g is votuntarily furnisi supplemental annua e receiver or trustee	6 1 TITLE 62 NAME 6.3 STREET 6.4 CHY-SI ned and does if report is true	ODRESS	or the exemption stated in Section 119.0 te and that my signature shall have the report as required by Chapter 607, Flo	07(3)(k), Florida S	tatutes. I further