


FILED
May 05, 2004 8:00 am
Secretary of State

05-05-2004 90197 023 ***150.00

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # K42842 1. Entity Name AIR-TOOL SERVICES INC.	
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Principal Place of Business 6080 N.W. 44TH STREET LAUDERHILL, FL 33319-4473	Mailing Address 6080 N.W. 44TH STREET LAUDERHILL, FL 33319-4473
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24070828



01062004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0080009	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GOLDSTEIN, IRVING
~~7800 N. UNIVERSITY DRIVE #100~~
~~TAMARAC, FL 33321~~
13450 WEST SUNRISE BLVD #150
SUNRISE FL 33323

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD SUNDHEIM, JACK 6080 N.W. 44TH STREET LAUDERHILL, FL 333194473
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S SUNDHEIM, MILDRED 6080 N.W. 44TH STREET LAUDERHILL, FL 333194473
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jack W Sundheim*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/27/04 954-484 0425