

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 SEP 10 AM 9:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K73276

1. Corporation Name
AIR -1- BOUQUET CORPORATION



Principal Place of Business
ANTONIO J. PINEROS
13167 SW 15TH LANE
MIAMI FL 33184

Mailing Address
ANTONIO J. PINEROS
13167 SW 15TH LANE
MIAMI FL 33184

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 109 N.W. 62 TERRACE		2a. Mailing Address 26 10965 N.W. 62 TERRACE		3. Date Incorporated or Qualified 03/16/1989	
Suite, Apt. #, etc. 22 MIAMI, FLORIDA		Suite, Apt. #, etc. 27 MIAMI, FLORIDA		4. FEI Number 65-0109841	
City & State 23 33178 USA		City & State 28 33178 USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 24 33178		Zip 29 33178		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Country 25 USA		Country 30 USA		8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent PINEROS, ANTONIO J. 13167 SW 15TH LANE MIAMI FL 33184				10. Name and Address of New Registered Agent			
81 Name PINEROS, ANTONIO J.				82 Street Address (P.O. Box Number is Not Acceptable) 10965 N.W. 62 TERRACE			
83 MIAMI				84 City			
85 FL				86 Zip Code 33178			

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	<input type="checkbox"/> DELETE	1.1 TITLE PD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME PINEROS, ANTONIO J.		1.2 NAME PINEROS, ANTONIO J.	
STREET ADDRESS 13167 SW 15TH LANE		1.3 STREET ADDRESS 10965 N.W. 62 TERRACE	
CITY-ST-ZIP MIAMI FL		1.4 CITY-ST-ZIP MIAMI, FL. 33178	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME 300002988323--5	
STREET ADDRESS		2.3 STREET ADDRESS -09/15/99--01100--014	
CITY-ST-ZIP		2.4 CITY-ST-ZIP ***150.00 ***150.00	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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.

SIGNATURE: Antonio J. Pineros **ANTONIO J. PINEROS PD** **AUGUST 30, 1999** 305-594-5781
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (1/198)

KE



Air-1 Bouquet, Co.

10965 N.W.62nd Terrace, Miami, Fl. 33178
Tel (305) 594-5781. Fax: (305) 594-4650.

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XXXXXXXXXXXXXXXXXXXX
XXXXXXXXXXXXXXXXXXXX
XXXXXXXXXXXXXXXXXXXX

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Miami, Fl. August 30, 1.999.

Annual Report Filings
Division of Corporations
P.O.Box 1500
Tallahassee, Fl. 32302-1500.

Ref: Excuse on late filing report for
Air 1 Corporation, 1.999.

Messrs:

I am the President and only acting Officer of Air-1-Corporation, dedicated to the importation of Flowers Bouquets from Ecuador and Colombia to the wholesale market in U.S.A. This is a small corporation and since July/98, we have not been active.

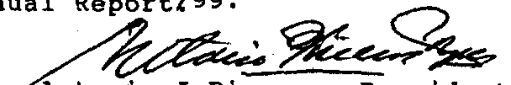
In December 13/98 I travel to Bogota, Colombia and I could not get back to Miami, by the middle of following January/99, because I had to undertake a surgical operation, the removal of a cancer in my face (melanoma in situ). which was done in March/99. Afterwards in April/99. I had and ischemic attack with the result of the lost of part of my right sight. By the end of May/99, I was hospitalized again suffering pneumonia. Finally at age 78, I survived and got back to Miami on June 3/99.

I enclose ⁽³⁾ medical certificates.

Because of all these troubles and being the only person that can activate the business of my Corporation, for the future, and the only Officer that could sign the Annual Report, I could not send it before the dead line of May 1rst/99.

Please accept this justification as the reason for not been able to file on time the Annual Report/99.

Sincerely yours,


Antonio J. Pinerros.-President
AIR-1-BOUQUET CORPORATION.