FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L62403** **(5)**

1. Corporation Name

AAA INTERAIR, INC.

Principal Place of Business	Mailing Address
950 S E 12TH ST HIALEAH FL 33010	950 S E 12TH ST HIALEAH FL 33010

3. Date Incorporated or Qualified: **04/04/1990**	3a. Date of Last Report: **04/17/1995**
4. FEI Number: **65-0183803**	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

FINAZZO, NICOLAS
950 SE 12TH STREET
HIALEAH FL 33010

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 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)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	11 TITLE	P	☐ Change ☒ Addition
NAME	BATCHELOR, MARIANNE T		12 NAME	POTTER, DOUGLAS	
STREET ADDRESS	950 SE 12TH STREET		13 STREET ADDRESS	950 SE 12 ST.	
CITY-ST-ZIP	HIALEAH FL		14 CITY-ST-ZIP	HIALEAH FL. 33010	
TITLE	V	☐ DELETE	21 TITLE	D	☐ Change ☒ Addition
NAME	WALKER, RAYMOND S		22 NAME	FERRARESI, DANIEL	
STREET ADDRESS	950 SE 12TH ST		23 STREET ADDRESS	950 SE 12 ST.	
CITY-ST-ZIP	HIALEAH FL		24 CITY-ST-ZIP	HIALEAH FL 33010	
TITLE	V	☐ DELETE	31 TITLE	D/C	☐ Change ☒ Addition
NAME	FINAZZO, NICOLAS		32 NAME	BATCHELOR, GEORGE	
STREET ADDRESS	950 SE 12TH ST		33 STREET ADDRESS	950 SE 12 ST.	
CITY-ST-ZIP	HIALEAH FL		34 CITY-ST-ZIP	HIALEAH FL. 33010	
TITLE	DS	☐ DELETE	41 TITLE		☐ Change ☐ Addition
NAME	BATCHELOR, ANNE O		42 NAME		
STREET ADDRESS	950 SE 12TH ST		43 STREET ADDRESS		
CITY-ST-ZIP	HIALEAH FL		44 CITY-ST-ZIP		
TITLE	V	☐ DELETE	51 TITLE		☐ Change ☐ Addition
NAME	MESECHER, BOYD		52 NAME		
STREET ADDRESS	950 SE 12TH ST.		53 STREET ADDRESS		
CITY-ST-ZIP	HIALEAH FL		54 CITY-ST-ZIP		
TITLE		☐ DELETE	61 TITLE		☐ Change ☐ Addition
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: Anna Q. Batchelor 1-10-96 (305) 887-4500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #)
ANNE O. BATCHELOR, SECRETARY

CR2E034 (12/95)