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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name L86169

(4)

Feb 23 1998 8:00am Secretary of State

	AL AIR, INC.						
Į.	ce of Business		iling Address				
1204 OLD ENTERPRISE RD LAKE HELEN FL 32744 US		1070 SHADICK DR #E P O BOX 363 ORANGE CITY FL 32763		DO NOT WRITE IN THIS	SPACE		
						3. Date Incorporated or Qualified	
2. Principal F	Place of Business	28	Mailing Address		····	07/03/1990 4. FEI Number	Applied for
21			1204 Old En	terori	se Rd	59-3020163	Applied For Not Applicable
Suite, Apt. #, etc.		1	Suite, Apt. #, etc.	· 1 · . ·			\$8.75 Additional
22		27				5. Certificate of Status Desired	Fee Required
City & Stat	lo	F 1	City & State	47.1		6. Election Campaign Financing	\$5.00 May Be
23		28	lake Helen			Trust Fund Contribution	Added to Fees
Zip 24	Country	1	Ž2744	Country 30 W		8. This corporation owes or has paid the cur	
24	9. Name and Address of Currer	29 nt Regist		30 W	<u> </u>	Personal Property Tax due June 30. 10. Name and Address of New Registered.	Yes No
CH	ANDLER, CRYSTAL D			81	Name	(U, Traine and Processes of their (Taglistology)	Agont
	A OLD ENTERPRISE ROAD			-	0		
	KE HELEN FL 32744			82	Street Addr	ress (P.O. Box Number is Not Acceptable)	
				83			· · · · · · · · · · · · · · · · · · ·
				84			Tabl 7: O. d.
				-	City	FL	85 Zip Code
11. Pursuant office or ragent La	to the provisions of Sections 607,050 registered agent, or both, in the State im familiar with, and accept the oblig	2 and 60 of Florid ations of,	7 1508, Florida Statutes a. Such change was au Section 607.0505, Flori	s, the above thorized by ida Statute:	e-named corp the corporat	poration submits this statement for the purpose of tion's board of directors. I hereby accept the app	changing its registered ointment as registered
SIGNATURE							
	Signature, typed or printed nature of registere Lage	A 15 A 15 A 16 A			ent signature requir	red when reinstating) DATE	
12.	OFFICERS AN	D DIHLC	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND	
NAME	CHANDLER, CRYSTAL D		C) DISCIE	1.1 TITLE			☐ Change ☐ Addition
STREET ADDRESS	1204 OLD ENTERPRISE RD			1.2 NAME	1000000		
CITY+ST-ZIP	LAKE HELEN FL			1.3 STREET			
TITLE	VP		□ DELE1E	1.4 City - S 2.1 Title	1-2119		Change Addition
NAME	CHANDLER, DAVID A		<u> </u>	2.2 NAME			Contrago CO Addition
STREET ADDRESS	1204 OLD ENTERPRISE ROAL)		2.3 STREET	ADDRESS		
CITY-ST-ZIP	LAKE HELEN FL			2. 4 CITY - 1			
TITLE			DELETE	3.1 TITLE			Change Addition
NAME				3.2 NAME			
STREET ADDRESS				33 STREET	ADDRESS		
CITY-ST-ZIP				3 4. DITY - 5	ST - Z IP		
TITLE			DELFTE	4.1 TITLE			Change Addition
NAME				4. 2 NAME			
STREET ADDRESS				4.3 STREET	ADDRESS		
CITY-ST-ZIP			T Lessers	4.4 CITY - S	T-ZIP		
TITLE			☐ DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME				5.2 NAME			
STREET ADORESS				5.3 STREET			
CITY-ST-ZIP			DELETE	5 4 City - S	T-ZIP		Choose T 4400
TITLE			T Diff. If	6 1 TITLE			Change Addition
NAME CTREET ANODECC				6 2 NAME	Abbbook		l
STREET ADORESS				6.3 STREET			ļ
CITY_CT_7ID #				E A CITY, C	T 71D		•

14. Thereby cortify that the information supplied with this filling 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 altachment with an address