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

DOCUMENT # M07650

Country

9. Name and Address of Current Registered Agent

AIR TRADERS, INC.

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

22

23

24

Zip

Principal Place of Business	 Mailing Address	
7925 NW 29TH ST MIAMI FL 33122 US	P O BOX 52-6126 MIAMI FL 33152-3126	

26

27

28

29

Zip

2a. Mailing Address

City & State

Suite, Apt. #, etc.

FILED Jan 27, 1999 8:00am **Secretary of State**

01-27-1999 90065 041 ***158.75



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

□No

11/13/1984 4. FEI Number

59-2463661

5. Certificate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

HEID), FRED C.									
12104 S.W. 109TH COURT MIAMI FL 33176			82	Street Addre	Street Address (P.O. Box Number is Not Acceptable)					
			83	83						
			84	City	*	gers at a person of the	85 Zip C	ode.		
200				L	41 - 41 - 41 - 4 - 4 - 4 - 4 - 4 - 4 - 4	1 F 4b	L	pointared		
office or re	to the provisions of Sections 607.0502 and egistered agent, or both, in the State of Flo	rida. Such change was au	thorized by	the corporatio	oration submits this statem in's board of directors. I he	ent for the purpose ereby accept the ap	pointment as reg	istered		
agent. I ar	m familiar with, and accept the obligations	of, Section 607.0505, Fion	da Statutes	•	* **;		•			
SIGNATURE	Signature, typed or printed name of registered agent and tit	le if continable (NOTE:	Penistered Anen	nt signature required	(when reinstating)	DATE				
12.	OFFICERS AND DIF		13.	K Signatore required	ADDITIONS/CHANG	ES TO OFFICERS	AND DIRECTOR	RS IN 12		
TITLE	PST PST	DELETE	1.1 TITLE				☐ Change	Addition		
	HEID, FRED C.		1.2 NAME							
NAME	· · · · · · · · · · · · · · · · · · ·			r ADDRESS	•					
STREET ADDRESS	12104 SW 109TH COURT	•		FADDRESS						
CITY-ST-ZIP	MIAMI FL	DELETE	1.4 CITY-S	T-ZiP			☐ Change	☐ Addition		
TITLE	D	□ nere1e	2.1 TITLE	-			Change			
NAME	HEID, FRED C.		2.2 NAME							
STREET ADDRESS	12104 SW 109TH COURT		2.3 STREET	TADDRESS						
CITY-ST-ZIP	MIAMI FL		2.4 CITY-S	T-ZIP		w-m				
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NAME .			4. 2 NAME							
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CITY-ST-ZIP			4.4 CITY-S	T- ZIP						
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STREET ADDRESS			5.3 STREET	TADDRESS			. •			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP						
TITLE		☐ DELETE	6.1 TITLE			•	☐ Change	☐ Addition		
NAME			6.2 NAME	•				į		
STREET ADDRESS		•	6.3 STREET	T ADDRESS						
CITY-ST-ZIP			6.4 CITY-S	ľ			****			
14 I borobus	certify that the information supplied with this	filing does not qualify for	the exempt	ion stated in S	Section 119.07(3)(i), Florida	Statutes. I further	certify that the in	formation		
indicated officer or Block 12	or this annual report or supplemental annu director of the corporation or the receiver o or Block 13 if changed, or on an attachmer	ial report is true and accur r trustee emplowered to ex it with an address, with all	rate and tha ecute this r other like e	t my signature report as requi mpowered.	e shall have the same legal red by Chapter 607, Florid	i епест as if made t da Statutes; and tha	inger oath; that i at my name appe	am an ars in		

Country

Name

30

SIGNATURE: