

FILE NOW: FILING FEE IS \$61.25

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Feb 13 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N04893 (6)

1. Corporation Name
AIR SERV INTERNATIONAL, INC.

Principal Place of Business 1902 ORANGE TREE LANE, SUITE 200 P.O. BOX 3041 REDLANDS CA 92374-2800	Mailing Address PO BOX 3041 REDLANDS CA 92374-2800 US
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3. Date Incorporated or Qualified 08/29/1984	
4. FEI Number 59-2500627	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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

9. Name and Address of Current Registered Agent

**MORGAN, CHARLES O., JR
1300 NW 167TH STREET
MIAMI FL 33169**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, type or print 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	CD	1.1 TITLE	D
NAME	GREGORY, FRED	1.2 NAME	
STREET ADDRESS	109 NE 57 ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	SEATTLE WA	1.4 CITY-ST-ZIP	
TITLE	SD	2.1 TITLE	
NAME	BENNETT, CHARLES	2.2 NAME	
STREET ADDRESS	2395 DELAWARE #198	2.3 STREET ADDRESS	
CITY-ST-ZIP	SANTA CRUZ CA	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	
NAME	MOBERG, ROBER	3.2 NAME	
STREET ADDRESS	1308 CANNON AVENUE	3.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PAUL MN	3.4 CITY-ST-ZIP	
TITLE	DP	4.1 TITLE	
NAME	FRIZZELL, KENNETH W	4.2 NAME	
STREET ADDRESS	12448 CLOCK	4.3 STREET ADDRESS	
CITY-ST-ZIP	REDLANDS CA	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	C/D
NAME		5.2 NAME	Godwin, Joyce
STREET ADDRESS		5.3 STREET ADDRESS	904 Brazos Place SE
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Albuquerque NM
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  Kenneth W. Frizzell January 26, 1998 (909) 793-2627

CR2E037 (10/97)