

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # *P00000024867*

1. Entity Name

AIR SHOPPE, INC.

FILED

May 21, 2002 8:00 am
Secretary of State

05-21-2002 90886 022 ***150.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

14052 SW 74 TERR.

3. Mailing Address

14052 SW 74 TERR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

MIAMI, FL.

City & State

MIAMI FL.

4. FEI Number

65-0989161

Applied For

Not Applicable

Zip

33183

Country

USA

Zip

33183

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

MARVIN FRANCISCO

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

14052 SW 74 TERR.

City *Miami*

FL

Zip Code

33183

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Marvin Francis
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so. ☐

(See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
*PRESIDENT / DIRECTOR
MARVIN FRANCISCO
14052 SW 74 TERR.
MIAMI - FL. 33183*

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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IN THIS SPACE**

13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Marvin Francis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/02

305-388-0577