

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 21, 2003 8:00 am
Secretary of State

08-21-2003 90107 039 ***150.00

CR2E034 (4/03)

DOCUMENT # P01000008222

1. Entity Name
AIRSHIP SERVICES, INC.



Principal Place of Business
777 EAST HIGHWAY 436
ALTAMONTE SPRINGS FL 32701

Mailing Address
777 EAST HIGHWAY 436
ALTAMONTE SPRINGS FL 32701

2. Principal Place of Business
795 DIANE CIRCLE

3. Mailing Address
795 DIANE CIRCLE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
CASSELBERRY, FL

City & State
CASSELBERRY, FL

Zip
32707

Country

Zip
32707

Country

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **NOT APPLICABLE**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PSTD** ☐ Delete
NAME **MILLS, RUSSELL**
STREET ADDRESS **777 EAST HIGHWAY 436**
CITY-ST-ZIP **ALTAMONTE SPRINGS FL 32701**

TITLE **PSTD** ☒ Change ☐ Addition
NAME **MILLS, RUSSELL**
STREET ADDRESS **795 DIANE CIRCLE**
CITY-ST-ZIP **CASSELBERRY, FL 32707**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08/12/2003

Date

407 702 4588

Daytime Phone #

ATTACHMENT

PP01000008222

80139462

**AIRSHIP SERVICES, INC.
795 DIANE CIRCLE
CASSELBERRY, FL 32707**

July 22, 2003

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: Airship Services, Inc.
Document Number PP01000008222

Dear Sir or Madam:

Please find enclosed the 2003 Uniform Business Report for Airship Services, Inc. along with a check in the amount of \$150.00 payable to the Department of State. Please be advised we did not receive the original notice and request a waiver of the penalty.

The Company's address has changed since the last annual report and the changes have been made on the enclosed Report. Please contact me with any questions.

Sincerely,



Russell Mills, President
Airship Services, Inc.