2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P01000074497 **DOCUMENT #**

1. Entity Name

AERO TECH INTERNATIONAL, INC.

FILED Mar 17, 2003 8:00 am Secretary of State

03-17-2003 90486 043 ***150.00

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2. Simpley Price of Brush ness Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State S. Certificate of Storus benied S. 75 Additional Fige Necktion Fige Necktion Fige Necktion Fige Necktion Contribution Sevent Additives of New Pregistered Agent Name Contribution Name Contribution Name and Address of New Pregistered Agent Name Sevent Additives (P.O. Sox Number is Not Acceptable) I Septimized Agent Fig. 200 Code. Fig. 2	6211 FORREST VILLAS CIRCLE		6211 FORREST VILLAS CIRCLE								•
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S. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 8. Name Name Name Name	City & State		City & State			4. FEI Numbe	65-1117764				
CORTES, ALFREDO J 2211 FORREST VILLAS CIRCLE FORT MYERS FL 33908 8. The above named only submits this statement for the purpose of onanging its registered agent, or both, in the State of Florida. I am familiar with, and accept the colligations of registered and only submits this statement for the purpose of onanging its registered agent, or both, in the State of Florida. I am familiar with, and accept the colligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the colligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the colligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the colligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the colligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the colligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the colligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the colligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the colligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the colligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the colligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the colligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the colligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the colligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the colligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the colligations of registered agent, or both, in the State of Florida Policy of Florida Policy	Zip	Country	Zip	try							
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FILE NOW!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS	8. The above na the obligation	amed entity submits this statement for ns of registered agent.	or the purpose of changing it	s register	ed office or regist	ered agent, or bot	it, in the diale of host	od. Parman	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	
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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: