

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 10, 2003 8:00 am**  
**Secretary of State**

04-10-2003 90125 030 \*\*\*150.00

**DOCUMENT # P01000087838**

1. Entity Name  
**AERONET INC.**



Principal Place of Business  
**4409 SUN 'N LAKE BLVD.  
SUITE F  
SEBRING FL 33872**

Mailing Address  
**4409 SUN 'N LAKE BLVD.  
SUITE F  
SEBRING FL 33872**



2. Principal Place of Business

**4325 SUN 'N LAKE BLVD**

Suite, Apt. #, etc.

**Suite 101**

City & State

**Sebring FL**

Zip

**33872**

Country

3. Mailing Address

**4325 SUN 'N LAKE BLVD**

Suite, Apt. #, etc.

**Suite 101**

City & State

**Sebring FL**

Zip

**33872**

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **81-0548927**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**BASSETTI, DENNIS R  
4409 SUN 'N LAKE BLVD.  
SUITE F  
SEBRING FL 33872**

7. Name and Address of New Registered Agent

Name  
**Bassetti, Dennis R**  
Street Address (P.O. Box Number is Not Acceptable)  
**4325 Sun 'N Lake Blvd**  
**Suite 101**  
City  
**Sebring** **FL** Zip Code  
**33872**

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.

**Dennis Bassetti** (NOTE: Registered Agent signature required when reinstating)

**4/7/03** DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

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

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete  
NAME **PULIDO, GABRIEL A**  
STREET ADDRESS **4409 SUN 'N LAKE BLVD., SUITE F**  
CITY-ST-ZIP **SEBRING FL 33872**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Change ☐ Addition  
NAME **PULIDO, GABRIEL A**  
STREET ADDRESS **4325 Sun 'N Lake Blvd, Suite 101**  
CITY-ST-ZIP **Sebring FL 33872**

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

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

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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**  
**Dennis Bassetti**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/7/03** **863-471-1183**  
Date Daytime Phone #

CR2E034 (10/02)