FILED
Apr 04, 2005 08:00 AM
Secretary of State

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000121844

1. Entity Name
AIR LOGIC SALES, INC.

Principal Place of Business	Mailing Address
3770 AIRFIELD DR WEST LAKELAND, FL 33811	6508 E FOWLER AVE TAMPA, FL 33617

DO NOT WRITE IN THIS SPACE

02072005 No Chg-P CR2E034 (10/03)

4. FEI Number
20-0345346
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MORRIS, J. MICHAEL
6508 E FOWLER AVE
TAMPA, FL 33617

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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 _____ DATE
(Signature, typed or printed name of registered agent and date if applicable) (NOTE: Registered Agent signature required when changing)

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $400.00

9. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fee

10. OFFICERS AND DIRECTORS

TITLE	DPS
NAME	FENTON, JOHN N
STREET ADDRESS	6508 E FOWLER AVE
CITY-ST-ZIP	TAMPA, FL 33617
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 asterisk, with all other like empowered.

SIGNATURE: _____ (813) 985-1140
(SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL) Date Daytime Phone #