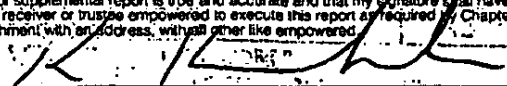


FILED
Mar 08, 2004 8:00 am
Secretary of State

02-06-2004 90001 008 ***150.00

2004 FOR PROEIT CORPORATION
ANNUAL REPORT

DOCUMENT # P03000153310			
1. Entity Name ALL AIR SERVICES, INC.			
Principal Place of Business 24021 JENNINGS ROAD MYAKKA CITY, FL 34251		Mailing Address 24021 JENNINGS ROAD MYAKKA CITY, FL 34251	
2. Principal Place of Business above Jennings Rd		3. Mailing Address 24021 Jennings Rd	
Suite, Apt. #, etc. X		Suite, Apt. #, etc. X	
City & State myakka City, FL		City & State myakka City, FL	
Zip 34251		Zip 34251	
Country manatee		Country manatee	
4. FBI Number 20-0520079		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HOOGERHEYDE, KENNETH 24021 JENNINGS ROAD MYAKKA CITY, FL 34251		7. Name and Address of New Registered Agent 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 reappointing.) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$350.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP President Kenneth Hoogerheyde		TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP Vice President Theresa Hoogerheyde		TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP Secretary Kenneth Hoogerheyde		TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP Treasurer Theresa Hoogerheyde		TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition	
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, without other like empowered.			
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF BRANCH OFFICER OR DIRECTOR		Date 1-27-04 Daytime Phone #	

Attachment

PO3000153310

66404768

President: Kenneth Hoogerheyde
24021 Jennings Road
myakka City, FL, 34251

Vice President: Theresa Hoogerheyde
24021 Jennings Road
myakka City, FL, 34251

Seceretary: Kenneth Hoogerheyde
24021 Jennings Road
myakka City, FL, 34251

Treasury: Theresa Hoogerheyde
24021 Jennings Road
myakka City, FL, 34251