

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **992000004447**

1. Entity Name

G & B AERO SERVICES, INC.

FILED
May 31, 2000 8:00 am
Secretary of State

05-31-2000 90103 004 ***150.00

00057842

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
1771 NE 59 CT **1771 NE 59 CT**
Ft Lauderdale FL **Ft Lauderdale FL**
33334 **33334**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **59-3153106** 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

JEFFREY M. GUTOWSKI
1771 NE 59 CT
Ft. Lauderdale FL
33334

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.

SIGNATURE

Jeffrey M. Gutowski

4/30/2000

(Type, type, or printed name of registered agent and title if applicable.)

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **VD** ☐ Delete
NAME **GUTOWSKI JEFFREY M**
STREET ADDRESS **2033 N. NEW ENGLAND AV.**
CITY-ST-ZIP **CHICAGO IL 60707**

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

TITLE **PD** ☐ Delete
NAME **GUTOWSKI LORRAINE M**
STREET ADDRESS **1771 NE 59 CT.**
CITY-ST-ZIP **FT LAUDERDALE FL 33334**

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

TITLE **STD** ☐ Delete
NAME **MCFARLAND MICHAEL**
STREET ADDRESS **2033 N NEW ENGLAND AV.**
CITY-ST-ZIP **CHICAGO IL 60707**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jeffrey M. Gutowski

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/4/2000 **773-622-8226**
Date Daytime Phone #

CR2E034 (9/99)