

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Norrman
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 2:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000004727 (2)

1. Corporation Name

PATRIOT AIR & ENGINEERING, INC.

Principal Place of Business

409 MONTGOMERY RD
SUITE 105
ALTAMONTE SPRINGS FL 32714
US

Mailing Address

409 MONTGOMERY RD
SUITE 105
ALTAMONTE SPRINGS FL 32714
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/14/1993

3a. Date of Last Report

05/01/1994

4. FEI Number

59-3159879

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☒ No

2. Principal Place of Business

21 **6415 MOORE ST**

2a. Mailing Address

26 **Same**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 **ORLANDO FL**

City & State

28 **ORLANDO FL**

Zip

24 **32818**

Country

25 **USA**

Zip

29 **32818**

Country

30 **USA**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MOFFETT, DAVID R
4472 WINDERLAKES DR.
ORLANDO FL 32835

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
D	GOMEZ, CARLOS	928 CLAYTON DR.	DELTONA FL 32725
D	MOFFETT, DAVID R	4472 WINDERLAKES DR.	ORLANDO FL 32835

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	Change	Addition
				☒	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐

*No Longer with Company
Remove as an officer*

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

David R. Moffett
DAVID R. MOFFETT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/95
Date

(407) 774-4229
Telephone Number