

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED), MINIMUM AMOUNT DUE TO REINSTATE: \$375

PROFIT CORPORATION
 ANNUAL REPORT
 1995



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

FILED

1995 JUL 25 AM 9:18

SUBMITTED TO THE
 TALLAHASSEE, FLORIDA

DOCUMENT # P93000048541 (5)

1. Corporation Name
PRO-TECH AIR CORPORATION

Principal Place of Business Mailing Address
1814 SW 81 TERRACE 1814 SW 81 TERRACE
DAVIE FL 33324 DAVIE FL 33324

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/06/1993
 3a. Date of Last Report 03/16/1994

2. Principal Place of Business 2b. Mailing Address
 21 6870 SW 1 COURT 26 6870 SW 1 COURT
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 22 27
 City & State City & State
 23 Pembroke Pines FL 28 Pembroke Pines FL
 Zip Country Zip Country
 24 33023 25 BROWARD 29 33023 30 BROWARD

4. FEI Number 65-0428224
 5. Certificate of Status Desired \$8.15 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

9. Name and Address of Current Registered Agent
WEINER, EDWARD A
1814 SW 81 TERRACE
DAVIE FL 33324

10. Name and Address of New Registered Agent
 81 Name **WEINER EDWARD A**
 82 Street Address (P.O. Box Number is Not Acceptable) **6870 SW. 1 COURT**
 83
 84 City **Pembroke Pines** FL 85 Zip Code **33023**

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 *Edward A. Weiner* President 7/20/95
Signature must be printed name of registered agent and title of applicant. (NOTE: Registered Agent signatures required after 1/1/95)

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	WEINER, EDWARD A
STREET ADDRESS	1814 SW 81 TERR
CITY, ST, ZIP	DAVIE FL 33324
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	WEINER EDWARD A.
13 STREET ADDRESS	6870 SW 1 COURT
14 CITY, ST, ZIP	Pembroke Pines FL 33023
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

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 110.07(3)(b), 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: *Edward A. Weiner* 7/20/95 (305) 474-8653
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date (Typed Name)

CR2E034 (3/95)