

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FILED Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90006 049 ***150.00

DOCUMENT # P93000048541

1. Corporation Name PRO-TECH AIR CORPORATION

Principal Place of Business 6870 SW 1ST CT PEMBROKE PINES FL 33023 US Mailing Address 6870 SW 1ST CT PEMBROKE PINES FL 33023 US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/06/1993 4. FEI Number 65-0428224 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 owes the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business 21 5917 S.W. 44 ST. Suite, Apt. #, etc. 22 City & State 23 DAVIE FL. Zip 24 33314 Country 25 USA 26 27 28 29 30

9. Name and Address of Current Registered Agent WEINER, EDWARD A 6870 SW 1ST CT PEMBROKE PINES FL 33023

10. Name and Address of New Registered Agent 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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Table with 12 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP, and a DELETE checkbox. Row 1: PD WEINER, EDWARD A, 6870 SW 1ST CT, PEMBROKE PINES FL.

Table with 13 columns: 1.1 TITLE, 1.2 NAME, 1.3 STREET ADDRESS, 1.4 CITY-ST-ZIP, and checkboxes for Change and Addition. Rows 2-13 are blank.

14. 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 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, with all other like empowered.

SIGNATURE: [Signature] 2/17/99 954 474-8653

CR2E034 (11/98)