PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000012405

INTERFACE AIRSHIPS, INC.

Principal Place of Business

Mailing Address

2116 58TH AVE. DRIVE WEST BRADENTON FL 34207

2116 58TH AVE. DRIVE WEST BRADENTON FL 34207

## FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90124 040 \*\*\*150.00



							DO NOT WRITE IN THIS SPACE	
							3. Date Incorporated or Qualifed 02/14/1994	
2. Principal Place of Business			2a. Mailing Address					pplied For
21	<u> </u>	26	P.O. B.	ox 4	119	7	0001111120	lot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certifcate of Status Desired   \$8.75 Additional Fee Required	
City & State	9		City & State				6. Election Campaign Financing S5.00	May Be
23	Ÿ	28	Terra (	Ceia.		FL		to Fees
Zip	Country		Zip	C	ountry	,	8. This corporation owes the current year Intangible	
24	25	29	34250	30		54	Personal Property Tax.	⊠No
	9. Name and Address of Currer			11			10. Name and Address of New Registered Agent	
					81	Name		
roman, Joseph J					20 Chart Address (D.O. Roy Number is Not Accordable)			
2116 58TH AVENUE DRIVE WEST					82	Street A	Address (P.O. Box Number is Not Acceptable)	
BRADENTON FL 34207					83	+		
					84	City	FL 85 Zip	Code
11. Pursuant i	to the provisions of Sections 607.050	02 and 60	7.1508, Florida St	atutes, the	abov	e-named o	corporation submits this statement for the purpose of changing it	s registered
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida	a. Such change wa	as authoriz	ed by	tne corpo	oration's board of directors. I hereby accept the appointment as i	registered
SIGNATURE	Signature, typed or printed name of registered age	ent and title if	applicable. (N	NOTE: Registe	red Age	nt signature re	aquired when reinstating) DATE	
12.	OFFICERS AN	ND DIREC			3.		ADDITIONS/CHANGES TO OFFICERS AND DIRECT	
TITLE	DV		☐ DELETE	1.1	TITLE	Ţ	☐ Change	Addition
NAME	ROMAN, JOSEPH J			1.2	NAME			
STREET ADDRESS	2116 58TH AVE. DR. WEST			1.3	STREE	TADDRESS		
CITY-ST-ZIP	BRADENTON FL			1.4	CITY-S	IT-ZIP		
TITLE	DV		☐ DELETE	2.1	TITLE		☐ Change	Addition
NAME	Kastner, Dennis			2.2	2 NAME	]		
STREET ADDRESS)	923 ARLINGTON ROAD			2.3	STREE	T ADDRESS		
CITY-ST-ZIP	PALMETTO FL 34221			2.	4 CITY-	ST-ZIP		
TITLE	T		☐ DELETE	3.1	TITLE		Change     Ch	Addition
NAME	WAY, SCOTT A			33	2 NAME			
STREET ADDRESS	1035 E. OAKVIEW			3.3	STREE	T ADDRESS	9409 Pine 5+.	
CITY-ST-ZIP	OLATHE KS			3.4	4. CITY-S	ST-ZIP	Lenexa, KS 66220	
TITLE	DP		☐ DELETE	4.	1 TITLE		Change	☐ Addition
NAME	WEIGLE, BRADLEY L			4.	2 NAME			•
STREET ADDRESS	P OBOX 317			4.3	STREE	T ADDRESS		
CITY-ST-ZIP	TERRA CEIA FL			4.4	4 CITY-S	ST-ZIP		
TITLE	8		☐ DELETE	5.1	1 TITLE		☐ Change	Addition
NAME	SMITH, KENNETH C			5.2	2 NAME	l		
STREET ADDRESS	1102 134TH ST. E.			5.3	3 STREE	T ADDRESS		
CITY-ST-ZIP	BRADENTON			5.4	4 CITY-S	ST-ZIP		
TITLE			☐ DELETE	6.1	TITLE		☐ Change	Addition
NAME				6.3	2 NAME			
STREET ADDRESS				6.3	3 STREE	TADDRESS		
OTHER ADDRESS				6.4	4 CITY-S	ST-ZIP		

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 AND TYPED OF SIGNATURE OF SIGNING

Scott A. Way Treasurer

4/29/99

(816) 502-4325

Daytime Phone #