

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

FILED
Jun 01 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P94000015567

1. Corporation Name:

AIR ASSIST INTERNATIONAL INC.

Principal Place of Business:

5553 N.W. 36th St.
Suite C
MIAMI, FL 33146

Mailing Address:

P.O. Box 330525
MIAMI, FL
33233

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/25/94

4. FEI Number

65-0465549

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business:

21 5553 N.W. 36th St.

Suite, Apt. #, etc.

22 Suite C

City & State

23 MIAMI, FL

Zip

24 33146

Country

25 US

2a. Mailing Address:

26 P.O. Box 330525

Suite, Apt. #, etc.

27

City & State

28 MIAMI, FL

Zip

29 33233

Country

30 US

9. Name and Address of Current Registered Agent

MICHAEL KEISTER unit #113
1000 N.W. North River DR
MIAMI, FL 33142

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 MICHAEL KEISTER

Printed Name of Agent Signature requested when filing this statement

DATE

12. OFFICERS AND DIRECTORS

TITLE PS
NAME MICHAEL KEISTER.
STREET ADDRESS 1000 NW North River Drive.
CITY-STATE-ZIP MIAMI, Florida 33142

☐ DELETE

TITLE VP
NAME DONALD W. KEISTER
STREET ADDRESS 1000 NW North River Drive.
CITY-STATE-ZIP MIAMI, Florida 33142

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-STATE-ZIP

15 CITY-STATE-ZIP

16 CITY-STATE-ZIP

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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 included 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 registered broker 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:

MICHAEL KEISTER

4/27/98 3058718484

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone

CR2E034 (10/97)