

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

CORPORATION,
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Nancy D. Hubbard
Secretary of State
Tallahassee, Florida 32399-0001

APPROVED
AND
FILED

95 MAY -1 PM 5:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000043709 (2)

By Corporation Name

SEAIR DYNAMICS, INC.

DO NOT WRITE IN THIS SPACE

2. The type of corporation: 21 Public Corporation		2b. Filing Address: 26 Public Address		3. Date of report (last day of quarter): 06/08/1994	3a. Date of last report: N/A
22. State: April 1st		27. State: April 1st		4. FCI Number: 65-0514440	Applied For: Not Applicable
23. City: Seattle		28. City: Seattle		5. Certificate of Status Desired: ☒ X	\$8.75 Additional Fee Required
24. State: WA		29. State: WA		6. Election Campaign Financing Trust Fund Contribution: ☐	\$5.00 May Be Added to Fees
25. Country: USA		30. Country: USA		8. This corporation has liability for adoption fee under 1993 (1)2 Florida Statutes: ☒ X	

9. Name and Address of Current Registered Agent

SAID, BRIAN R
1544 CYPRESS DR #18
JUPITER FL 33469

10. Name and Address of New Registered Agent

81. Name:	
82. Street Address (P.O. Box Number is Not Applicable):	
83. City:	
84. State:	FL
85. Zip Code:	

11. I, the undersigned, the president of Seair Dynamics, Inc., and K. J. Miller, Florida Statutes, the above named corporation submit this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. The change was authorized by the corporation's board of directors. I hereby accept this appointment as registered agent. I am a resident of the State of Florida and I am a resident of the State of Florida.

NOTARIAL

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	D SAID, BRIAN R 1544 CYPRESS DR #18 JUPITER FL 33469	NAME	☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	☐ Change ☐ Addition
CITY		CITY	☐ Change ☐ Addition
STATE		STATE	☐ Change ☐ Addition
ZIP		ZIP	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	☐ Change ☐ Addition
CITY		CITY	☐ Change ☐ Addition
STATE		STATE	☐ Change ☐ Addition
ZIP		ZIP	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	☐ Change ☐ Addition
CITY		CITY	☐ Change ☐ Addition
STATE		STATE	☐ Change ☐ Addition
ZIP		ZIP	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.02(2)(b) Florida Statutes. I further certify that the information submitted 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 name of officer or director is printed on this report as required by Chapter 199, Florida Statutes, and that my name appears in block letters on the report as an attachment with my address.

SIGNATURE:

Brian R. Said

BRIAN R. SAID

4-30-95 407 575668

Signature and typed or printed name of signing officer on Director