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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Apr 02 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9400089465 (6)

ALLEN AIR & ELECTRIC, INC.

Principal Place	of Business	Mailing Address	Mailing Address			E AND LINE OF STAR SIDER MINISTER AND LIST MONTH	4 40101 10110	/ <b>0</b> 111 <b>010 10 0</b> 11	EI 8311 3 <b>6</b> 81	
991 CHALMER DR.		P.O. BOX 309	P.O. BOX 309							
SUITE 6 MARCO ISLAND FL 34145		MARCO ISLAND FL 34146	MARCO ISLAND FL 34146 US			DO NOT WRITE IN THIS SPACE				
MARIOD ISLAN	ID FE 04143	03	00			3. Date Incorporated or Qualified				
						12/09/1994				
2. Principal P	ace of Business	2a. Mailing Address	28. Mailing Address			4. FEI Number Applied For			oplied For	
21		26				65-0539802	/_		ot Applicable	
Suite, Apt.	#, <b>e</b> 1c.	Suite, Apt. #, etc.				5. Certificate of Status Desired	X	\$8.75 / Fee Re		
City & State	<u> </u>	City & State	City & State			8 Flastian Compaign Singuistics	<u></u>			
23		<u>⊢</u> ¬ ′	28			8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip				Intry B. This corporation owes or has paid the current year Inlangible						
24	25 29 30			Personal Property Tax due June 30. Yes No						
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
WOODWARD, CRAIG R					81 Name					
_	BALD EAGLE DRIVE		82 Street Ad			dress (P.O. Box Number is Not Acceptable	le)			
	TE 500		}	83						
MA	RCO ISLAND FL 33969		L							
ļ			İ	84	City		FL	85   Zip (	Code	
11. Pursuant 1	to the provisions of Sections 607.09	502 and 607.1508, Florida Statute	s, the ab	ove-	named co	rporation submits this statement for the pr	urpose of o	hanging it	s registered	
	eg <b>iste</b> red agent, or both, in the Sta m <b>fam</b> iliar with, and accept the obl				he corpora	ation's board of directors. I hereby accep	I the appo	intment as	registered	
SIGNATURE										
				Agen	signature requ	uired when reinstating)  ADDITIONS/CHANGES TO OFFIC	DATE FDC AND	DIDECTOR	20 (6) 40	
12.			13.	1.1 TITLE		ADDITIONS/CHANGES TO OFFIC		Change	Addition	
NAME			1.2 NA				,			
STREET ADDRESS	341 YARMOUTH STREET				DORESS	1.17				
CITY-ST-ZIP		AARDO IOLIAAR SI AAAAM		Y - ST -	ZIP	(N/11/198 34	4145			
TITLE		☐ DELETE	2.1 1)(				11.9	Change	Addition	
NAME			2.2 NAME							
STREET ADDRESS		2		2.3 STREET ADDRESS					1	
CITY-SI-ZIP				IY-SI	- ZIP					
TITLE		☐ DELETE	3.1 TITLE				i	Change	Addition	
NAME (			3 2 NA						[	
STREET ADDRESS					DDRESS					
CITY-ST-ZIP	DELETE		_	3.4. CITY-ST-ZIP 4.1 TITLE			<u>-</u>	Change	Addition	
NAME			4.2 NA				•			
STREET ADDRESS					DDRESS					
CITY-ST-ZIP			i i	Y - ST -					1	
TITLE		☐ DELETE	5.1 117		1			Change	Addition	
NAME			5.2 NA	ME					1	
STREET ADDRESS			5.3 STI	reet ai	DDRESS					
CITY-ST-ZIP			_	Y-ST-	ZIP			<del></del>		
TITLE		DELETE	61 TIT				l	Change	Addition	
NAME			6.2 NA							
STREET ADDRESS					DDRESS					
CITY-ST-ZIP	ertify that the information supplied	with this filing does not qualify for		Y-ST-		n Section 119 07(3)(i) Florida Statutes 1	further cer	ify that the	information	
, a, incredy t	orang triat into tribumation supplied	that and ming does not qualify for	110 676	i ipit	an acutou ii	n Section 119.07(3)(i), Florida Statutes. I f	CONTRACTOR CONTRACTOR	ar and till	A Laman	

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.