Feb 26, 1999 8:00 am Secretary of State

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P95000008572**1. Corporation Name

ERICKSON ENTERPRISES INTERNATIONAL, INC.

Principal Place	e of Business	Mailing Address				-	ANIEL OREDI INIDI OLILE I	EBIA (IRI 148)
13808 NW 21ST LN		13808 NW 21ST LN	1			·		
GAINESVILLE FL 32606		GAINESVILLE FL 32606				DO NOT WRITE IN	THIS SDACE	
US US		US				3. Date Incorporated or Qualifed	THIS SPACE	
						01/27/1995		
2 Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number	I Ap	plied For
21	acc of Dasinood	26	-			59-3291765		t Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.					\$8.75 A	dditional
22	•	27				5. Certificate of Status Desired	Fee Re	quired
City & State		City & State				6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	Added t	o Fees
Zíp	Country	Zip	Cou	ntry		8. This corporation owes the current ye		
24	25		30			Personal Property Tax.		□No
	9. Name and Address of Curre	nt Registered Agent		81 N	Name	10. Name and Address of New Regist	erea Agent	
FRIC	KSON, ROBERT A			"	Name .			
13808 NW 21ST LANE			82 S	Street Addre	ess (P.O. Box Number is Not Acceptable)			
GAINESVILLE FL 32606				83				
	.201,022							
				84 0	City		FL 85 Zip C	Code
11 Durayant	to the gravisians of Sactions 607 050	22 and 607 1508 Florida Statut	es the al	bove-n	amed como	pration submits this statement for the purpo	se of changing its	registered
office or re	egistered agent, or both, in the State	of Florida. Such change was a	uthorized	l by the	corporatio	n's board of directors. I hereby accept the	appointment as reg	gistered
agent. I ai	m familiar with, and accept the obliga	ations of, Section 607.0505, Fig	nga Statt	nes.				
SIGNATURE	Signature, typed or printed name of registered age	not and title if applicable (NOTE	Decistored	Agent sig	anature required	(when reinstating)	TE	
			i togisioi du	Agont alg		i witer remaining)		
12.		ND DIRECTORS	13.	Agent sig	gratoro required	ADDITIONS/CHANGES TO OFFICER		
					ĮP	ADDITIONS/CHANGES TO OFFICER		RS IN 12
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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 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 pither like empowered.

SIGNATURE: