2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000022025

1. Entity Name

AERIAL TWO, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 FEB 25 AM 3:35

Principal Place of Business	Mailing Address
1810 SW 84 AVE DAVIE, FL 33324	1810 SW 84 AVE DAVIE, FL 33324

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1467 NW 153RD LANE Suite, Apt. #, etc.	1467 NW 153RD LANE Suite, Apt. #, etc.
City & State: PEMBROKE, FL	City & State: PEMBROKE, FL
Zip: 33028 Country: BROWARD	Zip: 33028 Country: BROWARD

4. FEI Number: 65-0586938 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
RORER, ERNEST H 1810 SW 84 AVE DAVIE, FL 33324	Name: BRODERSON, BRIAN Street Address (P.O. Box Number is Not Acceptable) 1467 NW 153RD LANE City: PEMBROKE FL Zip Code: 33028

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____ BRIAN BRODERSON 11 FEB 2002
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS $150.00
After MAY 1, 2002 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD RORER, ERNEST H	☒ Delete	PD RORER, H. ERNEST 22 BROADVIEW DRIVE RIDGELAND, SC 29936	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TSD RORER, MARILYNN K	☒ Delete	TSD RORER, MARILYNN D. 22 BROADVIEW DRIVE RIDGELAND, SC 29936	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	300005051013--7 -03/06/02--01064--029 ****150.00 ****150.00	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: H. Ernest Rorer PRES. H. ERNEST RORER 11 FEB 2002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #