FILED

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

NATURE AND THE ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 30, 2001 8:00 am Secretary of State DOCUMENT # P95000059883 1. Entity Name SANTANA AIR SYSTEMS, INC. 04-30-2001 90381 008 ***150.00 Principal Place of Business Mailing Address 2706 WEST ACAPULCO DRIVE 2706 WEST ACAPULCO DRIVE **LEUUUUUUU** MIRAMAR FL 33023 MIRAMAR FL 33023 2. Principal Place of Business 3. Mailing Address BAY#57. 3056 SOUTH STATE ROAD#7 (SAME) Suite, Apt. #, etc. BAY#57. Suite, Apt. #, etc. BAY#57. DO NOT WRITE IN THIS SPACE Applied For MIRAMAR, FLA.33023-5285. MIRAMAR, FLA. 33023-5285. 4. FEI Number NOT APPLICABLE Not Applicable BROWARD. 33023 - 5285. \$8.75 Additional 33⁶023-5285. BROWARD. 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KLEIN, MITCHELL D Street Address (P.O. Box Number is Not Acceptable) 1120 EAST HALLANDALE BEACH BLVD. HALLANDALE FL 33009 Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Change Addition CR2E034 (10/00) TITLE Delete TITLE SANTANA, LUIS NAME NAME STREET ADDRESS STREET ADDRESS 2706 WEST ACAPULCO DRVE CITY-ST-ZIP CITY-ST-ZIP MIRAMAR FL 33023 ☐ Change ☐ Addition Delete TITI F TITLE TILLMAN, JAMES MICHAEL NAME NAME STREET ADDRESS STREET ADDRESS 1170 N.W. 79TH TERRACE CITY-ST-ZIP CITY-ST-ZIP PEMBROKE PINES FL 33024 ☐ Addition TITLE ☐ Change TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP -CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE. ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with his filling indicated on this report or supplemental report is true as does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, 1 further certify that the information of accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if of the corporation or the receiver of trustee e changed, or on an attachment will

MR. LUIS R. SANTANA. APRIL, 15, 2001. (954) 964-8773