

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

**FILED**  
**Apr 30 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # **P95000092944 (4)**  
 1. Corporation Name  
**INTERNAL AIR SYSTEMS INC.**



Principal Place of Business Mailing Address  
**P.O. BOX 172836 MIAMI LAKES FL 33017** **P.O. BOX 172836 MIAMI LAKES FL 33017**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **12/07/1995**

4. FEI Number **65-0622996** Applied For  Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

2. Principal Place of Business 2a. Mailing Address

21 **9806 NW 80 AVE.** 26 **PO BOX 172836**  
 Suite, Apt. #, etc. Suite, Apt. #, etc.

22 **12H** 27  
 City & State City & State

23 **Hialeah Gardens, FL** 28 **MIAMI LAKES, FL**  
 Zip Country Zip Country

24 **33016** 25 **USA** 29 **33017** 30 **USA**

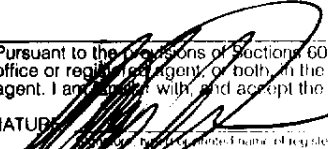
9. Name and Address of Current Registered Agent

**TORRES, HARRY**  
**2535 WEST 67TH PLACE**  
**SUITE 21**  
**HIALEAH FL 33016**

10. Name and Address of New Registered Agent

81 Name **HARRY TORRES**  
 82 Street Address (P.O. Box Number is Not Acceptable) **2535 W 67 PL.**  
 83 **Suite 21**  
 84 City **Hialeah** FL 85 Zip Code **33016**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE  **PRESIDENT HARRY TORRES** **4/21/98**  
 (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS

TITLE  DELETE

NAME **TORRES, HARRY**

STREET ADDRESS **2535 W. 67TH PLACE SUITE 21**

CITY-ST-ZIP **HIALEAH FL 33016**

TITLE  DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE  DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE  DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE  DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  Change  Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE  Change  Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE  Change  Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE  Change  Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE  Change  Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

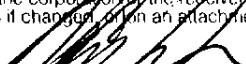
6.1 TITLE  Change  Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 in an attachment with an address.

SIGNATURE  **HARRY TORRES** **4/21/98** (205) 95-8849

CR2E034 (10/97)