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

CEPT

Jun 18 1997 8:00am

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State Secretary of State

PROFIT CORPORATION **ANNUAL REPORT**

1997

STREET ADDRESS CITY-ST-ZIP



DIVISION OF CORPORATIONS DOCUMENT # POSCOCO 10068 (0)

AIRMEC Principal Place	D INTERNATIONAL INC. Se of Business COUNTRY CLUB DRIVE	Mailing Address 19655 EAST COUNTRY CLU SUITE 304 AVENTURA FL 33180-4804	JB DRIVE	
				3. Date Incorporated or Qualified 3a, Date of Last Report 01/31/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number Applied For
 		26		65-0643771 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22 City & State		City & State		Fee Required
— ·		28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	This corporation has liability for intangible tax under s. 199 032,
24	25	⊢	30	Florida Statutes Yes No
	9. Name and Address of Curren			10. Name and Address of New Registered Agent
MANN, ANDREW L 10001 WEST OAKLAND PARK BLVD. B1 Name STEPHEN ENCEL B2 Street Address (P.O. Box Number is Not Acceptable)				STEPHEN EUGEL
SUITE 200			1968	55 EAST COUNTRY CLUB DRIVE
- SUNRISE FL 33351			83 AP	
			84 City	RE Zin Code
			Aire	NATURA PL MAISO
11. Pursuant to the provisions of Sections 607.050k and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, of both in the State of Torida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am lambfur with, and accept the obligation, of, Spection 607.0505, Florida Statutes.				
agent. Fam lambiar with, and accept the obligation of, Spection 607.0505, Florida Statules.				
SIGNATURE	1200	<u> </u>		June 1197 DATE
10	Signature, typed or printed name of registered age OFFICERS ANI		Registered Agent signature requ	
12.	PRESTOENT BEC		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME	BTA OHELS EXX	ec (4 O ALABATE	Onling Addition
STREET ADDRESS	19655 EAST COL	INTER CLUB DEN	-1.3 STREET ADDRESS	
CITY-ST-ZIP	APT BOY	33180	14 CHY-S1-ZIP	
TITLE	AUGUTURA, FL	□ DELETE	21 TITLE	☐ Change ☐ Addition
NAME			2 2 NAME	Control of the second of the s
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2. 4 CITY - ST - ZIP	
TITLE	:	DELETE	3.1 TITL€	Change Addition
NAME)		3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 111LE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 C(1Y+ST-ZIP	
TITLE		☐ DEL€1E	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREFT ADDRESS	
CITY-ST-ZIP			54 CITY-ST-ZIP	
TITLE		☐ DELETE	61 NILE	☐ Change ☐ Ap diti ion
NAME	l .		6.2 NAME	

-06/04/97--01009--005 ***330.00 14. I do 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 hystore 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.