

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****May 19, 2001 8:00 am
Secretary of State**

05-19-2001 90278 025 ***158.75

DOCUMENT # *P96000027484*

1. Entity Name

Aeropak, Inc.

Principal Place of Business

Mailing Address

2. Principal Place of Business

9954 Lakeview Drive

3. Mailing Address

9954 Lakeview Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

New Port Richey, FL

City & State

New Port Richey, FL

4. FEI Number

59-3370160

Applied For

Not Applicable

Zip

34654

Country

USA

Zip

34654

Country

USA

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

6. Name and Address of Current Registered Agent

Spiegel & Utrera
343 Almeria Ave.
Coral Gables, FL 33134

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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)

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, 2001 Fee will be \$550.00
State Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	President	☐ Delete
NAME	Tom Housteau	
STREET ADDRESS	9954 Lakeview Drive	
CITY-ST-ZIP	New Port Richey, FL 34654	
TITLE	Secretary	☐ Delete
NAME	Joan Housteau	
STREET ADDRESS	9954 Lakeview Drive	
CITY-ST-ZIP	New Port Richey, FL 34654	
TITLE	Treasurer	☐ Delete
NAME	Joan Housteau	
STREET ADDRESS	9954 Lakeview Drive	
CITY-ST-ZIP	New Port Richey, FL 34654	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:*Thomas J. Housteau**4-29-01*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Dayton, Florida

CR2E034 (1/00)