2000 UNIFORM BUSINESS REPORT (UBR)

SIGNAT

SIGNATURE:

Aug 02, 2000 8:00 am Secretary of State DOCUMENT # **P9700008936** 1. Entity Name AIR FRATER, INC. 08-02-2000 90150 041 ***150.00 Principal Place of Business Mailing Address 5950 W. OAKLAND PARK BLVD. 5960 W. OAKLAND PARK BLVD. **SUITE 103** SUITE 103 LAUDERHILL FL 33313 LAUDERHILL FL 33313 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0735271 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SPENCER, SHERNA Street Address (P.O. Box Number is Not Acceptable) 5950 W. OAKLAND PARK BLVD. SUITE 103 LAUDERHILL FL 33313 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition ☐ Delete TITI F ☐ Change TITLE FRATER, KEVIN NAME NAME STE. 103, 5950 W. OAKLAND PARK BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP FT. LAUDERDALE FL 33313 Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE 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-ZIP Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 chapters as required by the property with a lother like empowered. of the corporation or the receiver or trustee empowered to execute this re-changed, or on an attachment with an address, with all other like empowe

FILED

Daytime Phone #

Doc#P97000008936 B0103910

July 19, 2000

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

RE:

annual report for 2000/2001

AIR FRATER, INC

Dear Sir/Madam:

Please accept our fee for the report, which was due earlier this year. We were unaware that the date had passed for the early filing period. We did not receive the report from your office, neither was it sent to our registered agent. As such, we ask you to accommodate us by accepting the enclosed payment.

Thank you in advance for your cooperation.

Sincerely,

Kevin Frater President

Air Frater, Inc

Enclosure