

**2001 UNIFORM BUSINESS REPORT (UBR)**

Page 1 of 2

DOCUMENT # P91000008936  
 1. Entity Name  
AIR FRATER, INC

FILED  
 01 OCT 30 PM 1:17  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address  
5950 W. OAKLAND PARK BLVD SUITE 103 LAUDERHILL, FL 33313 US 521 SLIPPERY ROCK RD WESTON, FL 33327 US

2. Principal Place of Business Suite, Apt. #, etc.  
 3. Mailing Address Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State Zip Country  
 City & State Zip Country

4. FEI Number 65-0735271 Applied For Not Applicable  
 5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
KEVIN XAYMACCA FRATER  
521 SLIPPERY ROCK ROAD  
WESTON, FLORIDA 33327  
US

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] KEVIN X. FRATER DATE: 10-22-2001  
(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.  **FILE NOW!!! FEE IS \$150.00**  
After MAY 1, 2001 Fee will be \$550.00  
**Make Check Payable to Department of State**  
 10. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <u>P</u> <u>KEVIN X. FRATER</u> <u>521 SLIPPERY ROCK ROAD</u> <u>WESTON, FLORIDA 33327 US</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <u>VST</u> <u>MARL-PHILLIPK. FRATER</u> <u>521 SLIPPERY ROCK ROAD</u> <u>WESTON, FLORIDA 33327 US</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <u>600004696996-4</u> <u>-11/28/01--01051--004</u> <u>****150.00</u> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 empowerment.  
 SIGNATURE: [Signature] KEVIN X. FRATER 10-22-2001 (954)-217-0367

CR2E034 (11/00)



Payeroz

10-22-2001

Director  
Uniform Business Report  
Division of Corporations  
Tallahassee,  
Florida

**RE: Air Frater, Inc. (UBR)**

Dear Sir/Madame,

Please accept this filing and payment for Air Frater, Inc. (AFI) as a current Filing.

The Company had the following problems which caused an unforeseen delay in the receipt of its mail:

- a) Mail was sent to the Registered Agents address vs the mailing address
- b) Personnel at the mailing address and the Agents address went on vacation in such a manner that the mail crossed at the wrong time.
- c) As a Pilot I found that my trips kept me from the Office during week days which contributed to the overlooking of the Filing.

Respectfully,

Kevin X. Frater  
Registered Agent/Owner