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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT** # P97000028317 (0)

AERO-MAR, INC.

Mailing Address

## **FILED** May 19 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address		ı rancıanı ile irisi fodil dönir dörir dönir dönir dönib ilidə fildi ildir ildir ildi.
13506 NE 23 PLACE	13506 NE 23 PLACE		
NO MIAMI FL 33181	NO MIAMI FL 33181		DO NOT WRITE IN THIS SPACE
		•	3. Date Incorporated or Qualified
			03/25/1997
2. Principal Place of Business	2a. Mailing Address	w er	4 EEI Number
21 2600 NE 135	UST 26 8563 SH	11131561	65 0 759 35 7 Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22 Apt 2 - C City & State	27		Fee Required
23 North Miam	City & State	K C	6. Election Campaign Financing \$5.00 May Be
Zip Country		Country	Trust Fund Contribution Added to Fees
24 33/8/ 25 6	15 29 33173 30	n ,	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
	ess of Current Registered Agent		10. Name and Address of New Registered Agent
AVERA, TROY G JR		81 Name	LAUFOR TO
13506 NE 23 PLACE 82 Street Address			ess (P.O. Box Number is Not Acceptable)
NO MIAMI FL 33181		999	Brillet III
		83	C-1-
		84 City,	O U J
			FL 85 Zp Code 3 / 3 / 3 / 3
11. Pursuant to the provisions of Sect	tions 607.0502 and 607.1508, Florida Statutes,	the above-named corp	poration submits this statement for the purpose of changing its registered
agent I am familiar with range noci	cyl the obligations of Section 607.0505, Florid	a Statutes.	ion's board of directors. I hereby accept the appointment as registered
SIGNATURE	TRIUG. MV	EAD 7	1. 4/21/57
	of registreed apost and vent apole able (NOTE Re FLICERS AND DIRECTORS	gistered Agent signature require	
TITLE DVP	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME AVERA, TROY G J	<del></del>		L] Change [ Addition
STREET ADDRESS 13506 NE 23 PLAC		1.2 NAME	
CITY-ST-ZIP NO MIAMI FL 3318		1.3 STREET ADDRESS	
TITLE	DELETE	1.4 CITY - ST - ZIP  2.1 TITLE  10 1	Change Addition
NAME			
STREET ADDRESS		2.3 STREET ADDRESS 2.4	Usm Perrau /t
CITY-ST-ZIP		2.4 City-St-ZiP	100 NE 135 18 ST , # 2-C
TITLE	☐ DELETE	3.1 117LE	Change Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
City-st-zip		3.4 CITY-ST-ZIP	
TITLE	DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4. 2 NAME	
STREET ADDRESS	l	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY - ST - ZIP	
TITLE	☐ DELETE	51 TITLE	☐ Change ☐ Addition
NAME	1	5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CtTY - ST - ZIP	
TITLE	DELETE	6.1 TITLE	Change Addition
NAME	Ţ	6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY- ST-ZIP	

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 it 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 on a called ment with an address.