2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P9700030936 Jul 28, 2000 8:00 am Secretary of State 1. Entity Name AIR MANAGEMENT, INC. 07-28-2000 90154 005 ***150.00 Principal Place of Business Mailing Address 1948 SW WOODSIDE PLACE 1948 SW WOODSIDE PLACE PAM CIT FL 34990 PAM CIT FL 34990) (1980-1981) (1981) (1981) (1981) (1981) (1981) (1981) (1981) (1981) (1981) (1981) (1981) (1981) (1981) (1981 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0743130 Not Applicable Zip Country Ζip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HOUSEHOLDER, VIRGIL Street Address (P.O. Box Number is Not Acceptable) 1948 SW WOODSIDE PLACE PAM CIT FL 34990 Zip Code F١ 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 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 \Box Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11, Addition Change TITLE ☐ Delete TITLE HOUSEHOLDER, VIRGIL NAME NAME STREET ADDRESS STREET ADDRESS 7020 PENNY ROAD CITY-ST-ZIP CITY-ST-ZIP RALEIGH NC 27608 D ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME HOUSEHOLDER, SHARON STREET ADDRESS STREET ADDRESS 7020 PENNY ROAD CITY-ST-ZIP CITY-ST-ZIF RALEIGH NC 27606 ☐ Addition TITLE Delete TITLE Change 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-ZIP Change ☐ Defete TITLE Addition 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

13. I hereby certify that the information supplied with this filling 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/24/00

919.854.2989



Air Management, Inc. 7020 Penny Rd. Raleigh, NC 27606 919.851.7002

July 25, 2000

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

Subject: 2000 Uniform Business Report

To Whom It May Concern:

I am writing in regards to the filing fee due for the 2000 Uniform Business Report. I received a late notice this month requiring a late fee payment of \$550. Unfortunately, I never received the original notice.

I spoke to someone in your office and her instructions were to write a letter requesting a waiver of the late fee. With this I am enclosing a check for \$150.

Thank you for your attention.

Sincerely.-

Virgil Householder