SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

FILED AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750). Aug 26 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B, Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # 1. Corporation Name P97000075242 (2) AERIAL ENTREPRENEUR, INC. Principal Place of Business Mailing Address 117 FISHERMAN ROAD POST OFFICE BOX 650 SATSUMA FL 32189 SATSUMA FL 32189 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/28/1997 2a. Mailing Address 26 PO Box 2. Principal Place of Business Applied For 21 26 Not Applicable \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State 6. Election Campaign Financing \$5.00 May Be 23 28 **Trust Fund Contribution** Added to Fees Zip Country PUTNAN Personal Property Tax due June 30. 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name EDGETT, B. DAVID 117 FISHERMAN ROAD Street Address (P.O. Box Number is Not Acceptable) 82 SATSUMA FL 32189 83 City Zip Code 85 11. Pursuant to the provisions of sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607,0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (5/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 13. S.1 TITLE TITLE DELETE Change Addition EDGETT, B. DAVID NAME 1.2 NAME 117 FISHERMAN ROAD 1.3 STREET ADDRESS STREET ADDRESS SATSUMA FL 32189 1.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP 4.1 TITLE TITLE DELETE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP 5.1 TITLE DELETE TITLE NAME 5.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** ***150.00 5.4 CITY-ST-ZIP CITY-ST-ZIP

14. 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 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 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

6.1 TITLE

62 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

☐ Change

DELETE

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

AERIAL ENTREPRENEUR, INC-PO BOX 650 SATSUMA, FLORIDA 32189 August 5, 1998

Division of Corporations Annual Reports Filings PO Box 1500 Tallahassee, Florida 32302-1500

RE: Annual report

Dear Sir:

The attached Annual Report is the first report received by our business.

This business was incorporated on August 28, 1997.

Please waive the penalty of \$400.00 since we did not receive the first notice. This is a small business which can not afford a \$400.00 penalty.

Thank you for your assistance in this matter.

Sincerely.

David Edgett President