

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED  
 Sep 16 1998 8:00am  
 Secretary of State

PROFIT CORPORATION  
 ANNUAL REPORT  
 1998



FLORIDA DEPARTMENT OF STATE  
 Sandra B. Mortham  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # P976000 79825  
 1. Corporation Name  
 AERO PROTECT, CORPORATION

Principal Place of Business: 10880 SW 149 PLACE MIAMI, FL 33196  
 Mailing Address: 10880 SW 149 PLACE MIAMI, FL 33196

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 10880 SW 149 PLACE	26 10880 SW 149 PLACE
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 MIAMI, FL	28 MIAMI, FL
24 33196	29 33196
25 DADE	30 DADE

3. Date Incorporated or Qualified  
 SEPT 15, 1997

4. FEI Number  
 65 079 7493

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent  
 JOHN A. MITCHELL  
 10880 SW 149 PLACE  
 MIAMI, FL 33196

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

85 Zip Code

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: *John A. Mitchell* John A. Mitchell, President 4 Sept 98  
(NOTE: Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	John A. Mitchell
13 STREET ADDRESS	10880 SW 149 PL
14 CITY - ST - ZIP	MIAMI, FL 33196
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	000002646030
53 STREET ADDRESS	-09/22/98--01032--039
54 CITY - ST - ZIP	***150.00
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *John A. Mitchell* John A. Mitchell 4 Sept 98 (305)388-2763

CR2E034 (5/98)

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**Aero Protect, Corporation**

10880 SW 149th Place  
Miami, FL 33196  
Phone: (305) 388-2763

September 8, 1998

**Department of the State  
Division of Corporation**

P.O. Box 6327  
Tallahassee Florida, 32314

Dear Sirs:

I have enclosed a check for \$150.00 and the original annual report for my company Aero Protect, Corporation.

The form that was sent to me states "second notice" however I never received the first notice. I was not aware I needed to file an annual report and still would not be aware if I had not checked my corporation information on the Internet. I was looking at the information that is listed and noticed that the address for the corporation was not correct. I contacted the Division of Corporation and asked how to change the address of my company and was told I needed to do that when I filed the Annual Report. "Thampton" answered my call on August 26 and when she checked my corporation information she told me I had not filed the annual report and she could send me the form. Once received I could fill it out and at that time make the address corrections. The bottom line, I did not receive the annual report form because of the address error including zip code. I don't believe I should be penalized due to an input error by whoever processed my corporation papers originally.

The corporation number is P97000079825 and EIN number is 65-0797493.

I may be reached during the day at the following work number, which does have voice mail, if I am not in the office so please leave a message. I have also included a FAX number if needed.

Work Phone: (305) 380-3025 FAX (305) 380-2371

Thank You.

Sincerely,

  
John A. Mitchell