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

PROFI1 **CORPORATION ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham '

Secretary of State DIVISION OF CORPORATIONS

FILED Jun 04 1998 8:00am Secretary of State

1. Corporation Nan AMERICAN	INT # P97000 AIRMOTIVE, INC.	0081050 (1)		
Principal Place of B	usiness	Mailing Address		I (BBIIDD) sin intil indil doll abili doll abili doll abili doll doll doll doll doll
P.O. BOX 522230		P.O. BOX 522230		
MIAMI FL 33152		MIAMI FL 33152		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
	•			09/18/1997
2. Principal Place o	of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		(65 -0 8 3 0 5 3 5 Not Applicable
Suite, Apt. #, etc)	Suite, Apl. #, etc.		5 Contificate of Status Posited \$8.75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & State	_	City & State		Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution L.J Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25] Name and Address of Current	29	30	Personal Property Tax due June 30
_		Hadistelen Matil	81 Name	() - - - - - - - - -
1200 Ş i	RPORATION SYSTEM DUTH PINE ISLAND ROAD ITION FL 33324			Address (P.O. Blox Number is Non-appreptiable) + veet
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		83	HIDENI 6/ 33010
			84 City	FL 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 fapilify with and accept the obligations of the provision of the state of Education (NOTE flegislatic Agent sgrature required when reinstalling). Signature, typed or particular accept and the in agent and accept the accept and the in agent and accept the accept and the in agent and accept the accept and the in agent and accept and the in agent and accept the accept and the in agent and accept the accept and the in agent and accept and accept the accept and the in agent accept and accept and accept and accept and accept and accept accept and accept and accept accept and accept and accept accept and accept accept and accept accept accept and accept accep				
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE		DELETE	1.1 TITLE	Change Addition
NAME			1.2 NAME	BATCHELDR, GEORGE E.
STREET ADDRESS			1.3 STREET ADDRESS	950 S.E. 12th SHREET
CITY-ST-ZIP			1.4 CITY - ST - ZIP	HIALEAH, FL
TITLE		☐ DELETE	21 TITLE	Change X Addition
NAME			2.2 NAME	WALKER, KAYMONDS.
STREET ADDRESS			2 3 STREET ADDRESS	950 S.E. 12th STREET
CITY-ST-ZIP			2. 4 CITY-ST-ZIP	HIDIEAH, FL
TITLE		☐ DELETE	3 1 TITLE	Change Addition
NAME			3.2 NAME	ROHDE, CAROL
STREET ADDRESS			3.3 STREET ADDRESS	1/
CITY-ST-ZIP		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	HAIEAH, FL
TITLE		L. Ditter	4.1 III.E 4.2 NAME	C outrigo C Notition
NAME				
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CHY-ST-ZIP 5.1 TITLE	☐ Change ☐ Addition
NAME		<u> </u>	5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY - ST - ZIP			6.4 CITY-ST-ZIP	
	that the information supplied wit	th this filing does not qualify		ted 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 logal 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.