

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 31, 2000 8:00 am**  
**Secretary of State**  
 03-31-2000 90104 015 \*\*\*150.00

**DOCUMENT # P98000005859**

1. Entity Name

**AIRTECH COMMUNICATIONS CORPORATION**

Principal Place of Business

Mailing Address

27569 S DIXIE HWY  
 MIAMI FL 33196

27569 S DIXIE HWY  
 MIAMI FL 33196

2. Principal Place of Business

27569 S. Dixie Hwy

Suite, Apt. #, etc.

3. Mailing Address

27569 S. Dixie Hwy

Suite, Apt. #, etc.

City & State

Miami FL

City & State

Miami FL

Zip

33032

Country

Zip

33032

Country

4. FEI Number

65-0806947

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

CHIN, JENNIFER  
 11157 SW 154 PLACE  
 MIAMI FL 33196

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PSTD ☒ Delete  
 NAME CHIN, JENNIFER  
 STREET ADDRESS 11157 SW 154 PLACE  
 CITY-ST-ZIP MIAMI FL 33196

TITLE President ☐ Delete  
 NAME Jennifer Chin  
 STREET ADDRESS 27569 S. Dixie Hwy  
 CITY-ST-ZIP Miami, FL 33032

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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 STREET ADDRESS  
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TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. 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 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:

*Jennifer Chin*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/00 (305) 247-3186  
 Date Daytime Phone

CR2E034 (9/98)