

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90290 048 ***150.00

DOCUMENT # P98000052459					
1. Entity Name TURBINE KINETICS, INC.					
Principal Place of Business C/O HEICO CORPORATION 3000 TAFT ST. HOLLYWOOD, FL 33021			Mailing Address C/O HEICO CORPORATION 3000 TAFT ST. HOLLYWOOD, FL 33021		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0845883	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
MENDELSON, VICTOR H ESQ 825 BRICKELL BAY DR., STE.1644 MIAMI, FL 33131			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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT IRWIN, THOMAS S 3000 TAFT STREET HOLLYWOOD, FL 33021	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LETEMARE, ELIZABETH R. 3000 TAFT ST HOLLYWOOD, FL 33021
☐ Change ☐ Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LETEMARE, ELIZABETH 3000 TAFT STREET HOLLYWOOD, FL 33021	☒ Delete	
☐ Change ☐ Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MAIKASIAN, ROBIN 3000 TAFT STREET HOLLYWOOD, FL 33021	☐ Delete	
☐ Change ☐ Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS VETTER, JUDITH W 3000 TAFT STREET HOLLYWOOD, FL 33021	☐ Delete	
☐ Change ☐ Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PETERS, BRYAN 3000 TAFT STREET HOLLYWOOD, FL 33021	☒ Delete	
☐ Change ☐ Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PETERS, BRYAN 3000 TAFT STREET HOLLYWOOD, FL 33021	☐ Delete	
☐ Change ☐ Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PETERS, BRYAN 3000 TAFT STREET HOLLYWOOD, FL 33021	☒ Delete	
☐ Change ☐ Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PETERS, BRYAN 3000 TAFT STREET HOLLYWOOD, FL 33021	☐ Delete	
☐ Change ☐ Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PETERS, BRYAN 3000 TAFT STREET HOLLYWOOD, FL 33021	☐ Delete	
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Thomas S Irwin</u> <u>4-24-04</u> <u>954 9876101</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					