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## **2005 FOR PROFIT CORPORATION ANNUAL REPORT**

## Apr 08, 2005 8:00 am Secretary of State DOCUMENT # P98000052459 04-08-2005 90057 028 \*\*\*150.00 TURBINE KINETICS, INC. Principal Place of Business Mailing Address 40050673 C/O HEICO CORPORATION C/O HEICO CORPORATION 3000 TAFT ST. 3000 TAFT ST. HOLLYWOOD, FL 33021 HOLLYWOOD, FL 33021 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03302005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 65-0845883 Not Applicable Zip 、 Country Country \$8.75 Additional 5. Certificate of Status Desired П 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 Street Address (P.O. Box Number is Not Acceptable) MIAMI, FL 33131. 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Change **⋈** Addition TITLE ☐ Delete TITLE IRWIN, THOMAS S LETENDRE, ELIZABETH R NAME NAME 3000 TAPT STREET STREET ADDRESS 3000 TAFT STREET STREET ADDRESS HOLLYWOOD, FL 33021 CITY-ST-7IP HOLLYWOOD, FL 33021 CITY-ST-ZIP VGM TITLE ☐ Delete TIT1 F ☐ Change ☐ Addition NAME PETERS, BRYAN STREET ADDRESS STREET ADDRESS 3000 TAFT STREET CITY-ST-ZIP HOLLYWOOD, FL 33021 CITY-ST-ZIP TITLE **⊠** Delete TITLE ☐ Change ■ Addition MAIKASIAN, ROBIN NAME NAME 3000 TAFT STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33021 CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition VETTER, JUDITH W NAME NAME STREET ADDRESS STREET ADDRESS 3000 TAFT STREET CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD, FL 33021 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITI F ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 accuracy with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**