

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000074359

1. Entity Name

AIR ENGINEERING, INC.

Principal Place of Business

Mailing Address

2. Principal Place of Business

801 West Bay Drive

3. Mailing Address

Suite, Apt. #, etc.

103

City & State

Largo, Florida

Zip

33770

Country

USA

Zip

Country

4. FEI Number

59-3536235

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

00083210

6. Name and Address of Current Registered Agent

Albert C. Williams, Jr.
819 Jacaranda Drive
Largo, FL 33770

7. Name and Address of New Registered Agent

Name

LINDA J. RULE

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

801 West Bay Drive

Suite 103

City

Largo

FL

Zip Code

33770

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 *Linda J. Rule*

4/25/00

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 **P/S/T** ☐ Delete
NAME **Linda J. Rule**
STREET ADDRESS **801 West Bay Drive, #103**
CITY-STATE-ZIP **Largo, FL 33770**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

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STREET ADDRESS
CITY-STATE-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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CITY-STATE-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(d), 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: *Linda J. Rule* Linda J. Rule, President

April 25, 2000

727/585-8880

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone #

CR2E034 (9/99)