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

PROFIT
CORPORATION
ANNUAL REPORT
1999

SIGNATURE: Nous



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED May 17, 1999 8:00 am Secretary of State

954 266-3000

5/7/99

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05-17-1999 90082 039 ***158.75

DOCUMENT # 798000074500				
G-Air Holdings Corp.				* 556222 - 90000
Principal Place of Business Mailing Address				_
•		-		
1815 Griffin Rd. 1815 Griffin Rd.				
Suite 400 Suite 400				DO NOT WRITE IN THIS SPACE
Dani	a, FL 33004	Dania, FL	33004	3. Date Incorporated or Qualifed
				8/26/98
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number 752245498 Applied For
21		26	<u>. </u>	752245496 Not Applicable
Suite, Apt.	ŧ, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required
22 27 27 City & State City & State		City & State		
¬		28	-	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees—
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible
24	25	29 3	0	Personal Property Tax. ☐ Yes ☐ No
	9. Name and Address of Current			10. Name and Address of New Registered Agent
			81 Name	
South Florida Registered Agent, Inc Thomas P. Cooper				
				ddress (P.O. Box Number is Not Acceptable) 1815 Griffin Rd.
Ft. Lauderdale, FL 33301 83				
Sui				Suite 400
			84 City	Dania FL 85 Zip Code 33004
11 Pursuant t	to the provisions of Sections 607 0502	and 607 1508 Florida Statutes	the above-named co	organism submits this statement for the nurgose 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.				
agent, i ar	n familiar with, and accept the collocato			- /- /
SIGNATURE	Signature, typed or printed name of registered agent	Thomas P	COOPET legistered Agent signature req	nuired when reinstating) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D/P	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME		_	1.2 NAME	_ ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
	Thomas L. Coope		1.3 STREET ADDRESS	18
STREET ADDRESS	1815 Griffin Rd	•		
CITY-ST-ZIP	<u>Dania, FL 3300</u>	DELETE	1.4 CITY-ST-ZIP	Change Addition
TITLE		□ vetere	2.1 TITLE	
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	
_TTŢLE		DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4,4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	\
STREET ADDRESS			5.3 STREET ADDRESS	}
			5.4 CITY-ST-ZIP	Į
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
ĺ			6.2 NAME	
NAME			6.3 STREET ADDRESS	
STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed of on an attachment with an address, with all other like empowered.

Thomas L. Cooper