

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000076474

1. Corporation Name

AERO WRENCH SERVICES, INC.

Principal Place of Business	Mailing Address
2627 EVELYN DRIVE	2627 EVELYN DRIVE

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90107 041 ***150.00

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Principal Place	of Business	Mailing Address							
2627 EVELYN DRIVE 2627 EVELYN DRIVE									
APOPKA FL 327	703	APOPKA FL 32703				DO NOT WR	TE IN THIS !	SPACE	
						_3. Date Incorporated or Qualifed			
المناسبين المناسبين		سست المراج المشاسم	<i></i>			08/31/1998			
2 Deinoinal D	lace of Business	2a. Mailing Address				4. FEI Number			Applied For
	INTER OF DESTRESS	26				59-3137258			Not Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.							5 Additional
	# , 610.	27				5. Certifcate of Status Desired			Required
City & State	Δ	City & State	_			6. Election Campaign Financing		\$5.0	0 May Be
23	•	28				Trust Fund Contribution			ed to Fees
Zip	Country	Zip	Cou	intry		8. This corporation owes the cur	rent year Inta	ngible	
24	25	29	30	•		Personal Property Tax.	ŕ	🖺 Yes	√ No
	9. Name and Address of Curre		1=-1			10. Name and Address of New	Registered A	gent	
				81	Name				
POM	ieroy, richard e			82	Street Add	ress (P.O. Box Number is Not Accept	able)		
2627	' EVELYN DRIVE			[02]	Sueet Muut	1000 (1.0. DOX RUITIDE) TO NOT ACCEPT			
APOI	PKA FL 32703			83					
								Table	- 0-1-
				84	City		FL	85 Zi	ip Code
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (NOTE: ND DIRECTORS	: Registered	d Agent	signature require	d when reinstating) ADDITIONS/CHANGES TO OF	DATE FICERS AN	D DIREC	TORS IN 12
12.		DELETE	1.1 TI	П.Б	1	ABBITIONO/OFFINIOED TO OF	· · · · · · · · · · · · · · · · · · ·	Chang	
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STREET ADDRESS					1				
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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, or on an attachment with an address, with all other like empowered.

CR2E034 (11/98)