2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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changed, or on an attachment with

SIGNATURE:

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Apr 14, 2003 8:00 am Secretary of State

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04-14-2003 90102 015 ***158.75 1. Entity Name AEROINTEL. INC. Principal Place of Business Mailing Address 2501 S. OCEAN DRIVE, SUITE 714 2501 S. OCEAN DRIVE. SUITE 714 HOLLYWOOD FL 33019 HOLLYWOOD FL 33019 2. Principal Place of Business Mailing Address 6651 COW YEN KD 6651 COW PE Suite, Apt. #, etc Suite, Apt. #, etc M CHECK HERE IF MAKING CHANGES -208 SULTE SUITE Applied For City & State 4. FEI Number City & State 65-0992993 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired 3014 USA 3 Fee Required USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BAHNER, CHARLES F Street Address (P.O. Box Number is Not Acceptable) 2501 S. OCEAN DRIVE SUITE 714 HOLLYWOOD FL 33019 MIAMI 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 the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10... 11. PRESIDENT TITLE Change Addition TITLE ☐ Delete CHARLES F. BAHNER 6651 COW PEN RD., SUITE B-208 BAHNER, CHARLES NAME NAME 2501 S. OCEAN DR. STE. 714 STREET ADDRESS STREET ADDRESS MIAMI LAKES, FL. 33014 HOLLYWOOD FL 33019 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby 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

HARLES F. BAHNER AFRIL 11,2003