

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2001 8:00 am
Secretary of State
 01-30-2001 90133 045 ***150.00

DOCUMENT # P99000098873

1. Entity Name
AEROSPACE STRUCTURAL INTEGRITY, INCORPORATED

Principal Place of Business
**9385 DELAFIELD DRIVE
 HOBE SOUND FL 33455**

Mailing Address
**9385 DELAFIELD DRIVE
 HOBE SOUND FL 33455**

707656



2. Principal Place of Business

**B637 S.E. SHARON ST. HOBE SOUND
 Suite, Apt. #, etc. FL 33455**

3. Mailing Address

**B637 S.E. SHARON ST. HOBE SOUND
 Suite, Apt. #, etc. FL 33455**

DO NOT WRITE IN THIS SPACE

City & State

HOBE SOUND, FL

City & State

HOBE SOUND, FL

4. FEI Number **65-0965030**

Applied For

Not Applicable

Zip

33455

Country

Zip

33455

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**SMITH, LINDA C
 3458 SE DIXIE HWY
 STUART FL 34997**

7. Name and Address of New Registered Agent

Name

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

City

FL

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.

SIGNATURE

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, 2001 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 ☐ Delete
 NAME **D CARGILL, JOHN S**
 STREET ADDRESS **9385 DELAFIELD**
 CITY-ST-ZIP **HOBE SOUND FL 33455**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME **D CARGILL, JOHNS**
 STREET ADDRESS **8637 S.E. SHARON ST.**
 CITY-ST-ZIP **HOBE SOUND, FL 33455**

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

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

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

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

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

13. 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

John S. Cargill
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/16/01 (561) 546-7718
 Date Daytime Phone #

CR2E034 (10/00)