

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000104083

1. Entity Name

AEROCARGAS SUR INTERNATIONAL, CORP.

FILED
May 19, 2000 8:00 am
Secretary of State

05-19-2000 90066 001 ***150.00

Principal Place of Business

Mailing Address

8262 NW SOUTH RIVER DRIVE
 MEDLEY FL 33166

8262 NW SOUTH RIVER DRIVE
 MEDLEY FL 33166

2. Principal Place of Business

8346-C NW SOUTH RIVER DR.

3. Mailing Address

8346-C NW SOUTH RIVER DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MEDLEY, FL

City & State

MEDLEY, FL

Zip

Country

33166

Zip

Country

33166

4. FEI Number

65-0966867

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RIOS, LEOPOLDO
 1800 WEST 49TH STREET
 SUITE 207
 HIALEAH FL 33012

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
 NAME ARGUELLES, EMILIO N
 STREET ADDRESS 8262 NW SOUTH RIVER DRIVE
 CITY-ST-ZIP MEDLEY FL 33166

TITLE ☒ Change ☐ Addition
 NAME 8346-C NW SOUTH RIVER DR.
 STREET ADDRESS MEDLEY, FL 33166
 CITY-ST-ZIP

TITLE VTD ☐ Delete
 NAME ALBACI, DANIEL A
 STREET ADDRESS 8262 NW SOUTH RIVER DRIVE
 CITY-ST-ZIP MEDLEY FL 33166

TITLE ☒ Change ☐ Addition
 NAME 8346-C NW SOUTH RIVER DR.
 STREET ADDRESS MEDLEY, FL 33166
 CITY-ST-ZIP

TITLE SD ☐ Delete
 NAME VEGA, ALFRED
 STREET ADDRESS 8262 NW SOUTH RIVER DRIVE
 CITY-ST-ZIP MEDLEY FL 33166

TITLE ☐ Change ☐ Addition
 NAME 8346-C NW SOUTH RIVER DR.
 STREET ADDRESS MEDLEY, FL 33166
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05-01-00

Date

305 863 2255

Daytime Phone #

CR2E034 (9/99)