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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$76651

(6)

Mailing Address

AIR APPARENT CORPORATION

FILED Mar 04 1997 8:00am Secretary of State



2675 NW 56TH ST EXECUTIVE AIRPORT HANGER 51 FT LAUDERDALE FL 33308		2675 NW 56TH ST EXECUTIVE AIRPORT HANGER 51 FT LAUDERDALE FL 33309-2673		3. Date Incorporated or Qualified	3a. Date of Last Report
				08/28/1991	04/02/1996
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0282796	Not Applicable
Suite, Apt 22	#, etc	Suite, Apit. #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta 23		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Gountry 25	Zip 29	Country 30	8. This corporation has liability for i	ntangible tax under s. 199.032, Yes \tag No
	9. Name and Address of Cur	rent Registered Agent		10. Name and Address of New Re	gistered Agent
	ACKEY, KEITH J		81 Name		
	75 NW 56 ST Lauderdale FL 33309		82 Street	Address (P.O. Box Number is Not Acceptab	le)
			83		
			84 City		FL 85 Zip Code
11. Pursuant office or	t to the previsions of Sections 607.0 registered agent, or both, in the St	502 and 607.1508, Florida Statuate of Florida. Such change was	tes, the above-named authorized by the corp	corporation submits this statement for the population's board of directors. I hereby accept	urnose of changing its registered
agent. L	am familiar with, and accept the ob	ligations of, Section 607.0505, F	lorida Statutes.	• • •	
SIGNATURE	Signature, typed or publed name of registered	agent and title it applicable (NO	TE: Registered Agent signature	required when reinstating)	DATE
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
THLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	MACKEY, KEITH J		1.2 NAME		
STREET ADDRESS	2675 NW 56TH ST FT LAUDERDALE FL		1.3 STREET ADORESS		
CITY - S1 - ZIP	D DAUGENDALE FL	DELETE	1.4 C(TY - ST - Z(P 2.1 T(T),E		Change Addition
NAME	MACKEY, RENDA	becare	2.2 NAME		El Ollango El Madicion
STREET ADDRESS	AASE NEW PATIL OT		2.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL		2. 4 CITY - ST - ZIP		
Ti ^T LE		DELETE	3.1 TITLE		Change Addition
NAMi			3.2 NAME		
STREET ADORESS			3.3 STREET ADDRESS		
CITY-ST-Z#		PERTE	34. CITY+ST-ZIP		Почет Почет
TIFLE		L DELETE	4 1 TITLE		Change Addition
NAME PERSON AND DEED			4.2 NAME		
STREET ADDRESS CITY - ST - ZIP			4.3 STREET ADDRESS 1 4.4 CITY-ST-ZIP		
THLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
City - St - ZiP			5.4 CITY-ST-ZIP		
TIFLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADORESS			6.3 STREET ADDRESS		
CITY- ST. ZIP			6 4 CITY - ST - ZIP		

14. I do 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 3 if changed, or on an attachment with an address.

SIGNATURE:

Daytime Prione