FILE NOW: FI	LING FEE AFT	ER MAY 1 IS	S <b>\$2</b>	00		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
PROFIT CORPORATION		FLORIDA DEPAF Sandra E		TATE			
ANNUAL REPORT 1996		Secreta DIVISION OF (		NS			
OCUMENT #	V00960	(7)					
AIRTEC OF LONG	WOOD, INC.				1 48 EH SAIDH BOHL BOHD 10 HO OKU	8811 81821 81811 81814 818	II SIBH BIBH IBN
incipal Place of Business		Mailing Address					
P O BOX 852498 LAKE MARY FL 32795		P O BOX 952498 LAKE MARY FL 32795					
					3. Date incorporated or Qualified 12/16/1991	3a. Date of Last R 05/01/19	995
Principal Place of Business	2a 26	n. Mailing Address			4. FEI Number 59-3098153		Applied For Not Applicable
Suite, Apt. #, etc.	27	Suite, Apt. #, etc.			5. Certificate of Status Desired	Fee	Additional Required
City & State	28	L	Cour		Election Campaign Financing     Trust Fund Contribution     This corporation has liability for in	L.J Adde	May Be d to Fees
25	Country 29	L	30 Cou	y 	Florida Statutes Yes  10. Name and Address of New Re	□No	199.032,
9, Name and	Address of Current Regi	stereo Agent		Name	(U, Hame and Address of New Me	gistered Agent	
1409 SHELLMOUND F ENTERPRISE FL 3272	5		33 84	City		FL   `	ip Code
or registered agent, or both, familiar with, and accept the SNATURE	, in the State of Florida. Suc	ch change was authorize 7.0505, Florida Statutes.	ed by the con	named corpor poration's boar ant signature recure	ration submits this statement for the purp rd of directors. I hereby accept the appo	pate  DATE	registereo oni d agent. I ani
LE <b>PD</b>	OFFICERS AND DIRE	CTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICE	DERS AND DIRECTO	ORS IN 12
ME SCHLEICHI REET ADDRESS 1409 SHEL	ER, JEFFREY J. LIMOUND ROAD	EJ outen	1.2 NAME 1.3 STREE	I ADDRESS		O.migr	
Y-ST-ZIP ENTERPRIS		[X] DELETE	1.4 CiTY- 2 1 Tillus			Change	Addition
ME FLAKE, RA REET ADDRESS 3524 PALM SANFORD	<b>IWAY</b>			E1 ADDRESS			
Y-ST-ZIP SANFUKU LE ME	16	DELETE	2.4 CFTY - 3 1 TITLE 3.2 NAME			Change	Addition
REET ADDRESS				ET ADDRESS			
Y-ST-ZIP LE		DELETE	4. 1 TITLE			Change	Addition
ME REET ADDRESS			4.3 STRE	E1 ADDRESS			
Y-ST-ZIP LE		DELETE	4.4 CITY- 5. 1 TITLE			Change	Addition
me Reet address				ET ADDRESS			
Y-S1-ZIP LE		☐ DECETE	5.4 CITY 6.1 TITU 6.2 NAMI			☐ Change	Additio
ME RFET ADDRESS IY-ST-ZIP				ET ADDRESS			
<ol> <li>I do hereby certify that the i certify that the information in</li> </ol>	ndicated on this annual rec	ort or supplemental anni	ished and do	es not qualify rue and accur	for the exemption stated in Section 119. ate and that my signature shall have the iis report as required by Chapter 607, Flo	same legal effect as	if made unde
oath; that I am an officer or appears in Block 12 or Block IGNATURE:	director of the corporation ck 13 if changed, or on an a	or the repaiver or trusted attachment with an addr	e empowered ess.	d to execute th	schleicher 9-29-9	orida Statutes; and ti	nat my name