2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 01, 2002 8:00 am Secretary of State **DOCUMENT #** V02881 1. Entity Name AIR SYSTEMS MECHANICAL, INC. 05-01-2002 91588 048 ***150.00 Principal Place of Business Mailing Address 3679 NW 19TH STREET 8051 NW 46TH COURT R111182353 LAUDERDALE LAKES FL 33311 LAUDERHILL FL 33351 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0311093 Not Applicable Żip Country Zip Country 5. Certificate of Status Desired \$8.75 Additional 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MILLER, ROGER Street Address (P.O. Box Number is Not Acceptable) 8051 NW 46TH CT LAUDERHILL FL 33351 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, 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 FILE NOW!!! FEE IS \$150.00 Tax filing requirement and elects to do so. 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State Added to Fees 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition MILLER, ROGER NAME NAME STREET ADDRESS 8051 NW 46 CT STREET ADDRESS CITY-ST-ZIP LAUDERHILL FL CITY-ST-ZIP DILE Delete TITLE ☐ Change ☐ Addition NAME MILLER, JANET NAME 8051 NW 46TH CT STREET ADDRESS STREET ADDRESS CITY-ST-7IP LAUDERHILL FL 33351 CITY-ST-ZIP TITLE Delete TITI F ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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 in the chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 in the chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 in the chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 in the chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 in the chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 in the chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 in the chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 in the chapter 607, Florida Statutes; and that my name appears in Block 12 in the chapter 607, Florida Statutes; and the chapter 607 in the chapter 60

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SIGNATURE:

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