

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000071342

**Entity Name:** AIRBUSTERS, INC.

**Current Principal Place of Business:**

AIRBUSTERS INC  
6741 N.W. 22ND STREET  
MARGATE, FL 33063-2119

**Current Mailing Address:**

AIRBUSTERS INC  
P.O. BOX 936175  
MARGATE, FL 33093-6175 US

**FEI Number:** 65-0515437

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PIOTROWSKI, LINDA M  
6751 NW 22ND STREET  
MARGATE, FL 33063-2119 US

*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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title	PD	Title	VD
Name	PIOTROWSKI, LINDA M	Name	PIOTROWSKI, JOSEPH F
Address	6741 NW 22ND STREET	Address	6741 NW 22ND STREET
City-State-Zip:	MARGATE FL 33063	City-State-Zip:	MARGATE FL 33063

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** LINDA M PIOTROWSKI

**PRESIDENT**

**04/28/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date