2004 FOR PROFIT CORPORATION

CITY-ST-ZEP TITLE NAME STREET ADDRESS CITY-ST-ZIP

## Mar 22, 2004 08:00 AM **ANNUAL REPORT** Secretary of State **DOCUMENT # 188072** 1. Entity Name KENDALL FLYING SCHOOL, INC. Principal Place of Business Mailing Address 5771 SW 56TH STREET 5771 SW 55 ST. MIAMI, FL 33155 US MIAMI, FL 33155 US 03102004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-0754143 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GAFFANEY, MARY T DO NOT WRITE 5771 S W 55TH ST MIAMI, FL 33155 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title it applicable (NOTE Registered Agent signature required when reinstating) \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution, Added to Fees U000**000094**500 OFFICERS AND DIRECTORS 10. THE GAFFANEY, MARY T NAME 5771 SW 55TH STREET STREET ADDRESS CATY-\$1-ZIP MIAMI, FL STD TITLE NAME GAFFANEY, CHARLES STREET ADDRESS 5771 SW 55TH STREET MIAMI, FL CITY-ST-23P TITLE NAME STREET ADDRESS DO NOT WRITE CRTY-ST-ZIP THILE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP 3315 NAME STREET ADORESS

**FILED** 

12. 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 Slock 10 or Slock 11 if changed, or on an attachment with an address, with all other like empowered.

mary I. Hoslamay MARY T. CAFFANGY 03.18.2004 305-661-6304 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR