## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

## **PROFIT**



## FLORIDA DEPARTMENT OF STATE

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	JAL <b>R</b> EPORT		Sandra B. Mortham Secretary of State			Secretary of State					
	19 <b>9</b> 8	No. of the last of	DIVISION OF	•		S	Secret	ai y	$\Omega \Gamma S$	otate	
DOCU 1. Corporation	MENT # F647	748	(9)								
SERTEL	AIR, INC.		•				İ				
Principal Place of Business Mailing Address							-				
510 N.E. 59 CT. 510 N.E. 59 CT. FT. LAUDERDALE FL 33334 FT. LAUDERDALE FL 33334											
							DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or Qualified				]
2. Principal F	Place of Business	2a. Ma	iling Address				01/27/1982 4. FEI Number	<del> </del>	- Jar	plied For	-
21		26					59-2322713			ot Applicable	}
Sulte, Apt.	#, etc.	<b>⊢</b>	le, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A		]
City & Stal	te	27 City	y & State				6. Election Campaign Financing		\$5.00	· <del>··</del>	1
23		28		, <del></del>			Trust Fund Contribution		Added t	•	
Zip 24	Country 25	Zip		<b>30</b>	ntry		8. This corporation owes or has pa Personal Property Tax due June			angible No	
24	9. Name and Address of		d Agent	30			10. Name and Address of New Re				_
	CH <b>EZ</b> , ARMANDO E.				81 Na	ame		-		<del>-</del>	
	N.E. 59 CT.				82 St	reet Addre	ss (P.O. Box Number Is Not Acceptab	le)			1
F1. I	LAUDERDALE FL 33334				83						+
					<b>84</b> Ci				Jeel 7:- /	O a d a	-
					<b>84</b> Ci	ty		FL	85 Zip (	Code	
office or	registered agent, or both, in th	ne State of Florida. S	Such change was a	uthorized	by the	ed corpora	ation submits this statement for the purn's board of directors. I hereby accept	pose of cha	nging Its re	gistered gistered	]
agent. I	am familiar with, and accept the	ne obligations of, sec	ction 607.0505, Flo	rida Stat	utes.					•	
SIGNATURE	Signature, typed or printed name of regis				red Agent s	ignature require	ed when reinstating)	DATE			] 6
12.	OFFICE PD	ERS AND DIRECTO	<del></del>	13. 1.1 TII		<del></del>	ADDITIONS/CHANGES TO OFF	CERS AND	<u> </u>		] ğ
NAME	SANCHEZ, ARMANDO E		DELETE	1.2 NA				L	Change	Addition	3
STREET ADDRESS	510 N.E. 59TH COURT	••			REET ADDR	ESS					<u>ו</u>
CITY-ST-ZIP	FT. LAUDERDALE FL			1.4 CI	1.4 CITY-ST-ZIP						غ ا
TITLE	STD		DELETE	. 2.1 TIT					Change	Addition	`
NAME	Sanchez, Josefina N.   510 N.E. 59TH COURT	•		2.2 NA							
STREET ADDRESS CITY-ST-ZIP	FT. LAUDERDALE FL				REET ADDR TY-ST-ZIP	1500					
TITLE	, , , , , , , , , , , , , , , , , , , ,		DELETE	3.1 711					Change	Addition	1
NAME				3.2 NA	ME				-		
STREET ADDRESS					REET ADDR	ESS					
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NAME			DELETE	4.2 NA				L	_ Change	Addition	
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NAME				6.2 NA	ME	-		_			
STREET ADDRESS					REET ADDR	ESS					
CITY OF 3th				E A 4 CIT	OIE TO VE						

14. 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 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 13 if changed, or of an attachment with an address.