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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

SIGNATURE:

H22183

(8)

U.S. AVIATORS, INC.

## **FILED** Mar 31 1998 8:00am Secretary of State



|  | <del></del>   |  |   |   |  |   |                  |                            |                              |             |                |                      |  |
|--|---|--|---|---|--|---|------------------|----------------------------|------------------------------|-------------|----------------|----------------------|--|
| Principal Place  | e of Business   |  | Mailing A                                   | Address                                     |  |   | - }              | ( 1,00,000                 |                              |             |                |                      |  |
| 6595 STONE ROAD<br>WEST PALM BEACH FL 33413  |   |  |   | 6595 STONE ROAD<br>WEST PALM BEACH FL 33413 |  |   |                  | DO NOT WRITE IN THIS SPACE |                              |             |                |                      |  |
|  |   |  |   |   |  |   | 3.               | Date Incorr                | porated or Qu                |             | 1111001        | AOL                  |  |
|  |   |  |   |   |  |   | "                | 09/21/1                    |                              |             |                |                      |  |
| 2. Principal P   | lace of Business  |  | 2a. Mailin                                  | g Address                                   | <del></del>  | ·   | 4.               | FEI Numbe                  |                              |             |                | TA                   | pplied For                             |
| 21   |   |  | 26  | 26  |  |   |                  | 59-256                     | 30670                        |             |                | <b>*</b>             | ot Applicable                          |
| Suite, Apt. #, etc.  |   |  | Suite,                                      | Suite, Apt. #, etc.                         |  |   |                  |                            | of Status Des                | iend [      |                | \$8.75               | Additional                             |
| 22   |   |  | 27  |   |  |   | Б.               | Certificate                | UI Status Des                | sieu L      |                | Fee R                | equired                                |
| City & State   | е   |  | City 8                                      | State                                       |  |   | 6.               | Election Ca                | mpaign Fina                  | ٠.          | _              | \$5.00               | May Be                                 |
| 23   |   |  | 28  |   |  |   |                  |                            | Contribution                 |             | Ш              |                      | to Fees                                |
| Zιρ<br>∷⊐  | <b>├</b> ─┐   | Country  | Zip   |   | Count  | lry   | 8.               | •                          | ation owes o                 | •           |                |                      |  |
| 24   | 25  | Address of Curr  | 29  | Anani                                       | 30   |   |                  |                            | roperty Tax of<br>Address of |             |                |                      | □ No                                   |
| - 114  |   | Address of Con   | INIT MAGISTATO                              | Main  |  | 1 Name  |                  | ranne anu                  | MOGIESS DI                   | HOW HOUSE   | Stelled A      | Aeur                 |  |
|  | LL, ROY A.  |  |   |   | L  |   | ,                |                            |                              |             |                |                      |  |
|  | 95 STONE ROA  |  |   |   | [8   | Stree   | Address (P       | P.O. Box Nur               | nber is Not A                | Acceptable  | )              |                      |  |
| AAF  | est palm bea  | CH FL 33413  |   |   | a  | 13  |                  |                            |                              |             |                |                      |  |
|  |   |  |   |   | [7   |   |                  |                            |                              |             |                |                      |  |
|  |   |  |   |   | 8  | 4 City  |                  |                            |                              |             | FL             | <b>85</b> Zip        | Code                                   |
| 44 Diversant   | to the provisions   | of Sections 607.0  | 502 and 607 150                             | IR Florida Stal                             | tutos the abo  |   | d corporatio     | n eubmite th               | ie statement                 | for the pur |                | banging              | te registerer                          |
| office or r  | egistered agent.  | or both, in the Sta  | ate of Florida, Suc                         | ch change wa                                | s authorized   | by the co   | rporation's b    | board of dire              | ectors. I herel              | by accept t | the appo       | intment as           | registered                             |
| agent. I a   | ım tamiliar with, a   | nd accept the ob   | ligations of, Secti                         | on 607.0505,                                | Florida Statu  | tes.  |                  |                            |                              |             |                |                      |  |
|  |   |  |   |   |  |   |                  |                            |                              |             |                |                      |  |
| SIGNATURE  | Slovature brand or bra  | ded camp of terretared   | eant and tile if soning                     | able (N                                     | OTF: Bogielered A  | Anoni eignali   | re required when | n reinetation)             |                              |             | DATE           |                      |  |
|  | Signature, lyped or prin  | OFFICERS A   |   | <u>_</u>                                    | OTE: Registered A  | Agent signatu   |                  |                            | CHANGES T                    | O OFFICE    | DATE<br>BS AND | DIRECTO              | RS IN 12                               |
| 12.  |   |  | egent and title if applica<br>AND DIRECTORS | <u>_</u>                                    | 13.  |   |                  |                            | CHANGES T                    | O OFFICE    | RS AND         | DIRECTO<br>Change    |  |
|  | PST   | OFFICERS A   |   |   | ·  | E   |                  |                            | CHANGES T                    | O OFFICEI   | RS AND         | ***                  |  |
| 12.<br>TITLE<br>NAME   |   | OFFICERS A   |   |   | 13.<br>1.1 TSTL<br>1.2 NAM   | E<br>IE   |                  |                            | CHANGES T                    | O OFFICEI   | RS AND         | ***                  |  |
| 12. TITLE NAME STREET ADDRESS  | PST<br>HALL NI, RO  | OFFICERS A<br>DY A.<br>E RD  |   |   | 13.<br>1.1 Titul<br>1.2 NAM<br>1.3 SYRE  | E<br>IE<br>EET ADDRESS  |                  |                            | CHANGES T                    | O OFFICEI   | RS AND         | ***                  |  |
| 12.<br>TITLE<br>NAME   | PST<br>HALL NI, RC<br>6595 STON   | OFFICERS A<br>DY A.<br>E RD  |   |   | 13.<br>1.1 Titul<br>1.2 NAM<br>1.3 SYRE  | E<br>IE<br>EET ADDRESS<br>'-ST-ZIP  |                  |                            | CHANGES T                    | O OFFICEI   | RS AND         | ***                  | Additio                                |
| 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP  | PST<br>HALL MI, RC<br>6595 STON<br>W PALM BE                                    | OFFICERS A<br>DY A.<br>E RD<br>EACH FL                             |   | DELETE                                      | 13. 1.1 ISTLI 1.2 NAM 1.3 STRE 1.4 CITY  | E<br>HE<br>EET ADDRESS<br>'-ST-ZIP<br>E   |                  |                            | CHANGES T                    | O OFFICEI   | RS AND         | Change               | Addition                               |
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| 112.  TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP  TITLE  NAME  STREET ADDRESS  | PST<br>HALL III, RC<br>6595 STON<br>W PALM BE<br>D<br>HALL III, RC<br>6595 STON | OFFICERS A<br>DY A.<br>E RD<br>EACH FL<br>DY A.<br>E RD            |   | DELETE                                      | 13. 1.1 TITL 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITU 2.2 NAM 2.3 STRE   | E IE EET ADDRESS '-ST-ZIP E IE EET ADDRESS  |                  |                            | CHANGES T                    | O OFFICE    | RS AND         | Change               | Addition                               |
| 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME   | PST<br>HALL MI, RC<br>6595 STON<br>W PALM BE<br>D<br>HALL III, RC               | OFFICERS A<br>DY A.<br>E RD<br>EACH FL<br>DY A.<br>E RD            |   | DELETE                                      | 13. 1.1 TITL 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITU 2.2 NAM 2.3 STRE   | E EET ADDRESS '-ST-ZIP E BE EET ADDRESS Y-ST-ZIP  |                  |                            | CHANGES T                    | O OFFICEI   | RS AND         | Change               | RS IN 12 Addition Addition             |
| 112.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP  | PST<br>HALL III, RC<br>6595 STON<br>W PALM BE<br>D<br>HALL III, RC<br>6595 STON | OFFICERS A<br>DY A.<br>E RD<br>EACH FL<br>DY A.<br>E RD            |   | DELETE                                      | 13. 1.1 TITL 1.2 NAM 1.3 STR 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CITY   | E EET ADDRESS '-ST-ZIP E HE EET ADDRESS Y-ST-ZIP E  |                  |                            | CHANGES T                    | O OFFICEI   | RS AND         | Change               | Additio                                |
| 12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  | PST<br>HALL III, RC<br>6595 STON<br>W PALM BE<br>D<br>HALL III, RC<br>6595 STON | OFFICERS A<br>DY A.<br>E RD<br>EACH FL<br>DY A.<br>E RD            |   | DELETE                                      | 13. 1.1 TITL 12 NAM 1.3 STR: 1.4 CITY 2.1 TITL 22 NAM 23 STR: 2.4 CITY 3.1 TITL 32 NAM   | E EET ADDRESS '-ST-ZIP E HE EET ADDRESS Y-ST-ZIP E  |                  |                            | CHANGES T                    | O OFFICEI   | RS AND         | Change               | Addition                               |
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