

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2002 8:00 am
Secretary of State

02-19-2002 90065 007 ****50.00

DOCUMENT # L00000013196
1. Entity Name
C & L AVIATION, LLC

Principal Place of Business
3814 CURTIS PKWY
VIRGINIA GARDENS FL 33166
Mailing Address
3814 CURTIS PKWY
VIRGINIA GARDENS FL 33166

2. Principal Place of Business
358 S.W. 33RD ST.
Suite, Apt. #, etc.
3. Mailing Address
1721 S.E. NINTH ST.
Suite, Apt. #, etc.

City & State
FT. LAUDERDALE, FL
City & State
FT. LAUDERDALE FL

Zip
33315
Country
USA
Zip
33316
Country
USA

Barcode
DO NOT WRITE IN THIS SPACE
52-2275385
4. FEI Number APPLIED FOR
Applied For
Not Applicable
5. Certificate of Status Desired
\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
BAUMGARTEN, MAURICE J
100 S.E. 2ND ST., #4300
MIAMI FL 33131

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL 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
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

Table with 2 columns: MANAGING MEMBERS / MANAGERS. Rows include: LA FORGIA, ANTHONY; COLLINS, ED; FT. LAUDERDALE FL 33316.

Table with 2 columns: ADDITIONS / CHANGES. Includes checkboxes for Change and Addition.

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: [Signature] DATE: 2/8/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CF2E083 (9/01)