

Amended

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 JUN 14 PM 1:32

DOCUMENT # P99000018737

1. Entity Name

FINE/AAA INTERAIR, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

950 S.E. 12th Street

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 523726

Suite, Apt. #, etc.

City & State

Hialeah, FL

City & State

Miami, FL

Zip

33

Country

Zip

33152

Country

4. FEI Number

65-0896994

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Richard L. Richards

Street Address (P.O. Box Number is Not Acceptable)

2000 N.W. 62 Avenue

City

Miami

FL

Zip Code

33122

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.

Richard L. Richards

6-13-02

(NOTE: Registered Agent signature required when resigning)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☐

January 1 - May 1 Fee is \$150.00

After May 1 Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to: Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
CD	Dort A. Cameron, III	115 East Putnam Ave.	Greenwich, CT 06830
DV	Andrew Dwyer	115 East Putnam Ave.	Greenwich, CT 06830
DS	Seth M. Cameron	115 East Putnam Ave.	Greenwich, CT 06830
V	John FB Long	2000 N.W. 62 Ave	Miami, FL 33122
T	William Betts	950 S.E. 12 Street	Hialeah, FL 33010
P	Richard L. Haberly	4600 N.W. 36 Street	Miami, FL 33122

DO NOT WRITE
IN THIS SPACE

13. 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 Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John FB Long

6-13-02 (305) 871-6606

(Date)

Daytime Phone #

CR2E034B (12/01)