## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000052030 (0)

ABOVE AIR, INC.

## **FILED** Jan 22 1997 8:00am Secretary of State



Principa! Plac	ce of Business	Maling Add	Maring Address 7525 N.W. 61ST TERRACE. #3401 PARKLAND FL 33067-2402						, 501, 100,
7525 N.W. 618 PARKLAND FL	ST TERRACE. #3401 _ 33067						•		
						3. Date Incorporated or Qualified 07/06/1995	3a. Date 04/22	of Last F	Report
2. Principal f	Place of Business	2a. Mailing	Address			4. FEI Number			pplied For
21		26				05-0592854		N	ot Applicable
Suite, Apt	#, etc	Suite, A	pt. #, etc.			5. Certificate of Status Desired			Additional lequired
City & Sta	te	City & S	late			6. Election Campaign Financing		\$5.00	) May Be
23		28			-	Trust Fund Contribution			to Fees
Zipi	Country	Zip	L	Country		8. This corporation has liability for			s. 199.032,
24	25	29		30			Yes 🗌		
· · · · · · · · · · · · · · · · · · ·	g. Name and Address of Cu	rrent Registered Ag	ent			10. Name and Address of New Ro	gistered Ag	ent	
	rino, christopher			81	Name				
	25 N.W. 61ST TERRACE, #340 RKLAND FL 33067	)1	82 Street A		Street Add	dress (P.O. Box Number is Not Accepta	ole)		
				83					
				84	City		FL	<b>85</b> Zip	Code
office or agent 1 a SIGNATURE	registered agent, or both, in the S am familiar with, and accept the of Signature spector pointed name of registero	tate of Florida. Such bligations of, Section	change was au 607.0505, Flor	ithorized by ida Statutes	the corpora	poration submits this statement for the lation's board of directors. I hereby acce	pt the appoi	ntment as	s registered
12.	OFFICERS	AND DIRECTORS		13.	i	ADDITIONS/CHANGES TO OFFI	CERS AND D	IRECTO	RS IN 12
TITLE	D		DELETE	1 1 TITLE				Change	Additio
NAME	MARINO, CHRISTOPHER			1.2 NAME					
STREET ADDRESS	7525 N.W. 61ST TERRACE,	<b>#</b> 3401		13 STREET	ADDRESS				
CITY - ST - ZIP	PARKLAND FL 33067			1.4 C(TY-S	T-ZIP				1511111
TIDLE			DELETE	21 TITLE				Change	Additio
NAME				2.2 NAME					
STREET ADDRESS				2.3 STREET	ADDRESS				
CHTY-S1-ZIP				2. 4 CITY-	ST-ZIP				
TITLE			DELETE	3.1 TITLE			E	Change	Additio
NAME				3.2 NAME	ļ				
STREET ADORESS				3 3 STREFT	ADDRESS				
CITY - ST - ZIP				3.4. CITY -	ST - 21P		*********		
TITLE		Į.	DELETE	4.1 TITLE			L	Change	Additio
NAME				4. 2 NAME					
STREET ADDRESS				4.3 STREET	ADDRESS		•		
City - St - ZIP				4.4 CITY - S	T-ZIP				· — · · · · · · · · · · · · · · · · · ·
THLE			DELETE	5 1 TITLE			L	_] Change	Additio
NAME				5.2 NAME					
STREET ADDRESS				53 STREET	ADDRESS				
City-St-ZIP		· · · · · · · · · · · · · · · · · · ·		54 DITY-5	T-ZIP				
TITLE			DELETE	61 TITLE			Τ	Change	Addition Addition
NAME.				6.2 NAME					
STREET ADDRESS				6.3 STREET	ADDRESS				
City-St-7iP				6.4 CITY - 9	T - 71P				

14. I do 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 on an attachment with an address.