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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P96000067475 (9)

PREMO AIR, INC.

Principal Place of Business

P.O. BOX 766 DAYTONA BEACH FL 32115 Mailing Address

P.O. BOX 766

DAYTONA BEACH FL 32115

## **FILED** Apr 15 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

					001101111111111111	OUNCE
					3. Date Incorporated or Qualified 08/12/1996	· · · · · · · · · · · · · · · · · · ·
2, Principal I	Place of Business	2a. Mailing Address		- <del></del>	4. FEI Number	Applied For
21		26			59-3396456	Not Applicable
Suite, Apt	. #, etc.	Suite, Apt. #, etc.				\$8.75 Additional
27		27			5. Certificate of Status Desired	Fee Required
City & Sta	ll <del>e</del>	City & State			6. Election Campaign Financing  Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Count	rv	8. This corporation owes or has paid the d	
24	25	29	30	•	Personal Property Tax due June 30.	Yes No
<del></del>	g. Name and Address of Curi	11	1001		10. Name and Address of New Registere	
PF	REMO, ROBERT F		8	1 Name		. •
8 WINDSOR DRIVE				J		
ORMOND BEACH FL 32174				82 Street Address (P.O. Box Number is Not Acceptable)		
01	MINO(ID DENOTITE VETTY		8	3		<del></del>
			8	4 City		85 Zip Code
Ad Discussion	10 15 and 10 and	2500		<u> </u>	F	
office or agent. I a	registered agent, or both, in the Sta am familiar with, and accept the ob	ale of Florida. Such change was ligations of, Section 607.0505, Fl	authorized t lorida Statuti	ve-named corpora by the corpora es.	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	or changing its registered oppointment as registered
SIGNATURE	Signature, typod or printed name of registered	agent and title if applicable (NO)	TE Registered A	gent signature requi	ired when reinslating) DATE	
12.	OFFICERS A	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PO	DELET <b>é</b>	1.1 TITLE			☐ Change    Addition
NAME	PREMO, ROBERT F		1.2 NAME			
STREET ADDRESS	8 WINDSOR DRIVE		1.3 STREE	ET ADDRESS		
CITY-ST-ZIP	QRMOND BEACH FL		1.4 CITY-		32	174
TITLE		DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME			2.2 NAME	1		
STREET ADDRESS	ļ			T ADDRESS		
CITY-ST-ZIP						
TITLE		DELETÉ	2 4 CITY 3.1 TITLE			Change Addition
NAME			3.2 NAME			Change Radillon
STREET ADDRESS				1 ADDRESS		
CITY-ST-ZIP						
TITLE		DELETE	3.4. CITY 4.1 TITLE	- 51 - ZIP		Change Addition
NAME			4.1 IIILE			C Change C Manifold
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - 5.1 TITLE	S1-ZIP		Change Addition
		L DELETE				☐ Change ☐ Addition
NAME			5.2 NAME	1		
STREET ADDRESS			5.3 STREE	1 ADDRESS		
CITY-ST-ZIP			5.4 CiTY-	ST-ZIP		
TITLE		☐ DELET <b>e</b>	6.1 TITLE			Change  Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREE	T ADDRESS		
City-St-ZiP			64 CITY-	ST- 7IP		

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 suppliemental 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.