

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 355850**

1. Entity Name

AIR OPERATIONS INTERNATIONAL CORPORATION**FILED**
Feb 01, 2000 8:00 am
Secretary of State

02-01-2000 90045 041 ***150.00

Principal Place of Business

Mailing Address

**4000 NW 28TH STREET
MIAMI FL 33142****4000 NW 28TH STREET
MIAMI FL 33142-5612**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1315886

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BARED, JOSE
2000 NW 96 AVE.
MIAMI FL 33172**Name **BARED, JOSE**Street Address (P.O. Box Number is Not Acceptable)
4000 NW 28TH STREETCity **MIAMI****FL**Zip Code **33142**

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

1/27/009. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☒ Delete
P	PARTENZA, LOUIS F	4000 NW 28TH ST.	MIAMI FL 33142	

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
D	BARED, JOSE	4000 NW 28TH ST.	MIAMI FL 33142	

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
D	BARED, VICTOR	4000 NW 28TH ST.	MIAMI FL 33142	

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
V	RODRIGUEZ, ELIAS	4000 NW 28TH ST.	MIAMI FL 33142	

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change	☐ Addition

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☒ Change	☐ Addition
P	BARED, JOSE	4000 NW 28TH STREET	MIAMI, FL 33142		

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☒ Change	☐ Addition
V/S	BARED, VICTOR	4000 NW 28TH STREET	MIAMI FL 33142		

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☒ Change	☐ Addition
V/T	RODRIGUEZ, ELIAS	4000 NW 28TH STREET	MIAMI, FL 33142		

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change	☐ Addition

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change	☐ Addition

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSE BARED**1/27/00**

Date

(305) 871-5446

Daytime Phone #