## 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000052153

Entity Name: ISLAND WIND TOURS, INC.

## Current Principal Place of Business:

401 BISCAYNE BLVD MIAMI , FL 33132

## **Current Mailing Address:**

12050 NE 14 AVE NORTH MIAMI, FL 33161 US

# FEI Number: APPLIED FOR

### Name and Address of Current Registered Agent:

SAVITS, CODY 12050 NE 14 AVE NORTH MIAMI, FL 33161 US

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:

Electronic Signature of Registered Agent

## Officer/Director Detail :

TitleP/DNameSAVITS, CODYAddress12050 NE 14 AVECity-State-Zip:NORTH MIAMI FL 33161

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CODY SAVITS

PRESIDENT

04/08/2019 Date

Electronic Signature of Signing Officer/Director Detail

FILED Apr 08, 2019 Secretary of State 7585318229CC

Certificate of Status Desired: No

Date