

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000139737

Entity Name: PAPI FLIGHT TRAINING, LLC**Current Principal Place of Business:**1450 LEE WAGENER BOULEVARD
FORT LAUDERDALE, FL 33315**Current Mailing Address:**1450 LEE WAGENER BOULEVARD
FORT LAUDERDALE, FL 33315 US**FEI Number:** 46-3866206**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GAGNON, ELSA
1055 NE 96TH STREET
MIAMI SHORES, FL 33138 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_____
Date**Authorized Person(s) Detail :**

Title	MGR
Name	SORS, PEDRO
Address	1450 LEE WAGENER BOULEVARD
City-State-Zip:	FORT LAUDERDALE FL 33315

Title	MGR
Name	GAGNON, ELSA
Address	1450 LEE WAGENER BOULEVARD
City-State-Zip:	FORT LAUDERDALE FL 33315

Title	MGR
Name	PINCAVAGE, JOHN
Address	1450 LEE WAGENER BOULEVARD
City-State-Zip:	FORT LAUDERDALE FL 33315

Title	MGR
Name	MOROTTI, DANIEL
Address	1450 LEE WAGENER BOULEVARD
City-State-Zip:	FORT LAUDERDALE FL 33315

Title	AMBR
Name	AVENGER FLIGHT GROUP LLC
Address	1450 LEE WAGENER BOULEVARD
City-State-Zip:	FORT LAUDERDALE FL 33315

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ELSA GAGNON**MANAGER****04/05/2017**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date