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**FILED**  
**Apr 20, 1999 8:00 am**  
**Secretary of State**

04-20-1999 90207 035 \*\*\*150.00

PROFIT CORPORATION  
 ANNUAL REPORT  
 1999



FLORIDA DEPARTMENT OF STATE  
 Katherine Harris  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # 287095

1. Corporation Name  
 NATIONAL AVIATION MANAGEMENT CORPORATION



Principal Place of Business  
 3495 SW 9TH AVE  
 FT LAUDERDALE FL 33315  
 US

Mailing Address  
 3495 SW 9TH AVE  
 FT LAUDERDALE FL 33315  
 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

11/18/1964

4. FEI Number

59-1108834

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

City & State

City & State

6. Election Campaign Financing

\$5.00 May Be Added to Fees

Zip Country

Zip Country

8. This corporation owes the current year Intangible Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BOY, THOMAS E  
 3495 S.W. 9TH STREET  
 FORT LAUDERDALE FL 33315

81 Name  
 Thomas E. Boy

82 Street Address (P.O. Box Number is Not Acceptable)  
 3495 S.W. 9th Avenue

83

84 City  
 Ft. Lauderdale FL 85 Zip Code  
 33315

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept, the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* Thomas E. Boy 4/13/99  
 DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP  
 NAME BOY, THOMAS E  
 STREET ADDRESS 3495 S.W. 9TH STREET  
 CITY-ST-ZIP FORT LAUDERDALE FL 33315

1.1 TITLE DP  
 1.2 NAME Thomas E. Boy  
 1.3 STREET ADDRESS 3495 S.W. 9th Avenue  
 1.4 CITY-ST-ZIP Ft. Lauderdale, FL 33315

TITLE DV  
 NAME BOY, T RUSSELL  
 STREET ADDRESS 3495 S.W. 9TH STREET  
 CITY-ST-ZIP FORT LAUDERDALE FL 33315

2.1 TITLE DV  
 2.2 NAME T. Russell Boy  
 2.3 STREET ADDRESS 3495 S.W. 9th Avenue  
 2.4 CITY-ST-ZIP Ft. Lauderdale, FL 33315

TITLE T  
 NAME ROBBIN, WENDY B  
 STREET ADDRESS 3495 SW 9TH AVE  
 CITY-ST-ZIP FT LAUDERDALE FL 33315

3.1 TITLE  
 3.2 NAME  
 3.3 STREET ADDRESS  
 3.4 CITY-ST-ZIP

TITLE VPS  
 NAME ROBBIN, SAMUEL  
 STREET ADDRESS 3495 SW 9TH AVE  
 CITY-ST-ZIP FT LAUDERDALE FL 33315

4.1 TITLE  
 4.2 NAME  
 4.3 STREET ADDRESS  
 4.4 CITY-ST-ZIP

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

5.1 TITLE  
 5.2 NAME  
 5.3 STREET ADDRESS  
 5.4 CITY-ST-ZIP

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

6.1 TITLE  
 6.2 NAME  
 6.3 STREET ADDRESS  
 6.4 CITY-ST-ZIP

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 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, with all other like empowered.

SIGNATURE: *[Signature]* Thomas E. Boy 4/13/99 954-359-9400  
 DATE Daytime Phone #

CR2E034 (1/1/98)