

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

FILED
May 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 479112 (5)
1. Corporation Name
IAL AIR SERVICE, INC.

Principal Place of Business
950 S.E. 12TH ST.
HIALEAH FL 33010-5931

Mailing Address
950 S.E. 12TH ST.
HIALEAH FL 33010-5931



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 07/09/1975		4. FEI Number 59-1615112		Applied For Not Applicable	
5. Certificate of Status Desired ☐		6. Election Campaign Financing Trust Fund Contribution ☐		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No		8. \$8.75 Additional Fee Required		9. \$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent HENRICKSON, MICHAEL R 950 SE 12TH ST HIALEAH FL 33010				10. Name and Address of New Registered Agent 81 Name POLK, RHONDA S. 82 Street Address (P.O. Box Number is Not Acceptable) 950 S.E. 12TH STREET 83 84 City HIALEAH FL 85 Zip Code 33010			
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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 *Rhonda S. Polk, Asst. Secretary* 5/16/98
Signature typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	DPC	☐ DELETE	11 TITLE	☐ Change ☐ Addition			
NAME	BATCHELOR, GEORGE E.		12 NAME				
STREET ADDRESS	950 S.E. 12TH ST.		13 STREET ADDRESS				
CITY-ST-ZIP	HIALEAH FL		14 CITY-ST-ZIP	☐ Change ☐ Addition			
TITLE	D	☐ DELETE	21 TITLE				
NAME	FERRARESI, DANIEL J		22 NAME				
STREET ADDRESS	950 SE 12 STR		23 STREET ADDRESS				
CITY-ST-ZIP	HIALEAH FL		24 CITY-ST-ZIP	☐ Change ☐ Addition			
TITLE	T	☐ DELETE	31 TITLE				
NAME	HIGGINS, JOHN		32 NAME				
STREET ADDRESS	950 S.E. 12TH ST.		33 STREET ADDRESS				
CITY-ST-ZIP	HIALEAH FL		34 CITY-ST-ZIP	☐ Change ☐ Addition			
TITLE	V	☒ DELETE	41 TITLE	☐ Change ☒ Addition			
NAME	MESECHER, BOYD		42 NAME	SIMKOVITZ, LEONARD			
STREET ADDRESS	950 S.E. 12TH ST.		43 STREET ADDRESS	950 SE. 12TH STREET			
CITY-ST-ZIP	HIALEAH FL		44 CITY-ST-ZIP	HIALEAH, FL			
TITLE	DS	☐ DELETE	51 TITLE	☐ Change ☐ Addition			
NAME	BATCHELOR, MARIANNE T.		52 NAME				
STREET ADDRESS	950 SE 12TH STREET		53 STREET ADDRESS				
CITY-ST-ZIP	HIALEAH FL		54 CITY-ST-ZIP				
TITLE	V	☐ DELETE	61 TITLE	☐ Change ☐ Addition			
NAME	WALKER, RAYMOND S		62 NAME	SEE ATTACHED LIST			
STREET ADDRESS	950 SE 12TH STREET		63 STREET ADDRESS	FOR ADDITIONAL OFFICERS			
CITY-ST-ZIP	HIALEAH FL		64 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.

SIGNATURE: *Rhonda S. Polk, Asst. Secretary* 4/16/98 (305) 889-6222

CR2E034 (10/97)

OFFICERS & DIRECTORS

COMPANY: IAL AIR SERVICE, INC.

<u>Title</u>	<u>Name</u>	<u>Address</u>
AS	Polk, Rhonda S.	950 S.E.12th Street Hialeah, FL 33010