

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 527120 (0)

1. Corporation Name

FLORIDA AVIATION, INC.

Principal Place of Business

ATTENTION: EDWARD J GOLDBERG
777 BRICKELL AVE., 3RD FLOOR
MIAMI FL 33131
US

Mailing Address

ATTENTION: EDWARD J GOLDBERG
777 BRICKELL AVE., 3RD FLOOR
MIAMI FL 33131
US

2. Principal Place of Business

2a. Mailing Address

21	State, Apt. #, etc.	26	State, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	County	29	County
25		30	

9. Name and Address of Current Registered Agent

BERGMAN, RICHARD ESQ.
SUITE 780
777 BRICKELL AVE.
MIAMI FL 33131

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered officer 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 of principal officer or registered agent, if applicable

Signature of Agent, if Agent is not the registered agent

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	[] DELETE
NAME	BLAISE, BRUCE C	
STREET ADDRESS	777 BRICKELL AVE	
CITY-STATE-ZIP	MIAMI FL	
TITLE	STD	[] DELETE
NAME	GOLDBERG, EDWARD J	
STREET ADDRESS	777 BRICKELL AVE	
CITY-STATE-ZIP	MIAMI FL	
TITLE	VD	[] DELETE
NAME	TINNY, J. KEVIN	
STREET ADDRESS	777 BRICKELL AVE.	
CITY-STATE-ZIP	MIAMI FL	
TITLE	VD	[] DELETE
NAME	THOMPSON, JOHN P	
STREET ADDRESS	777 BRICKELL AVE	
CITY-STATE-ZIP	MIAMI FL	
TITLE		[] DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		[] DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	[] Change	[] Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-STATE-ZIP		
2.1 TITLE	[] Change	[] Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-STATE-ZIP		
3.1 TITLE	[] Change	[] Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-STATE-ZIP		
4.1 TITLE	[] Change	[] Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-STATE-ZIP		
5.1 TITLE	[] Change	[] Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-STATE-ZIP		
6.1 TITLE	[] Change	[] Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-STATE-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Edward J. Goldberg / Edward J. Goldberg, Director

4/2/96 (305) 579-7213

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

TELEPHONE NUMBER

CR2E034 (12/95)