

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90139 006 ***158.75

DOCUMENT # 527120

1. Corporation Name

FLORIDA AVIATION, INC.

Principal Place of Business

ATTENTION: JOHN THOMPSON
777 BRICKELL AVE., 3RD FLOOR
MIAMI FL 33131
US

Mailing Address

ATTENTION: JOHN THOMPSON
777 BRICKELL AVE., 3RD FLOOR
MIAMI FL 33131
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/04/1977

4. FEI Number

65-0349043

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

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

☐ Yes

☒ No

2. Principal Place of Business

2a. Mailing Address

21 ATTN: JOHN THOMPSON, 4TH FLR

26 ATTN: JOHN THOMPSON, 4TH FLR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 777 BRICKELL AVENUE

27 777 BRICKELL AVENUE

City & State

City & State

23 MIAMI FL

28 MIAMI FL

Zip

Zip

24 33131 25 USA

29 33131 30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New 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 607.1508, 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, typed or printed name of registered agent and title if applicable

RICHARD BERGMAN, REGISTERED AGENT

2-11-98

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME BLAISE, BRUCE C
STREET ADDRESS 777 BRICKELL AVE
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE STD
NAME GOLDBERG, EDWARD J
STREET ADDRESS 777 BRICKELL AVE
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE VD
NAME TINNY, J. KEVIN
STREET ADDRESS 777 BRICKELL AVE.
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE VD
NAME THOMPSON, JOHN P
STREET ADDRESS 777 BRICKELL AVE
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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: JOHN THOMPSON, V.P.

2-11-99

305-579-7341

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)