FILE NOW: FILING FEE AFTER MAY 1ST IS \$550,00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

i. Corporatio		,		•					
FLYING	PEGASUS CORP.								
Principal Place of Business Mailing Address						-	10011 0101 0101		II UI DIR BIBII (BB)
2239 HOLLYWOOD BLVD. 3301 NW 65 ST									
HOLLYWOOD FL 33020 FT. LAUDERDALE FL 33309 US									
						DO NOT WRITE IN THIS SPACE			
	•					3. Date incorporated or Qualife 05/02/1977	ed '	•	
Principal Place of Business 2a. Mailing Address						4. FEI Number			Applied For
21		26			59-1740586			Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		•	Additional	
22	1-	27 City & State						Required	
City & Stat	te	City & State			6. Election Campaign Financin	9 🗆		May Be	
Zip	Country	Zip Country			Trust Fund Contribution		·····	to Fees	
24			30			8. This corporation owes the corporation of th	irrent year t	ntangible Yes	□No
24	9. Name and Address of Curren		301			10. Name and Address of New	/ Registere		
		y	1	B1 N	lame			_ / -0 _ / / /	
WINTTER, ERNST G 2239 HOLLYWOOD BLVD. HOLLYWOOD FL 33020				2 0	troot Adde-	on /D O Boy Number is blad Asses	otoblo)		
				82 S	u eet Addre	ss (P.O. Box Number is Not Acce	otable)		
				83		And the state of the state of		. 14: 2 3 1 1	13.12.22.13
							<u> 1871 (18基集</u>		
			ľ	84 C	ity		F	L 85 Zip	Code "
11, Pursuant	to the provisions of Sections 607.050:	2 and 607.1508, Florida Statute	s, the abo	ove-na	med corpo	ration submits this statement for th	e purpose o	of changing it	ts registered
office or r agent. I a	egistered agent, or both, in the State of im familiar with, and accept the obligation	of Florida. Such change was au tions of, Section 607.0505, Flor	uthorized t ida Statuti	by the es.	corporation	n's board of directors. I hereby acc	ept the app	ointment as i	registered
SIGNATURE						•			•
SIGNATURE	Signature, typed or printed name of registered agen	it and title if applicable. (NOTE:	Registered A	gent sig	nature required	when reinstating)> 1 > 7	DATE	· · · · · · · · · · · · · · · · · · ·	
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO C	FFICERS A		
TITLE	PD	☐ DELETE	1.1 TITLE					Change	Addition
NAME	WINTTER,ERNST G.		1.2 NAM						
STREET ADDRESS	2239 HOLLYWOOD BLVD.		1.3 STRE						
CITY+ST-ZIP	HOLLYWOOD FL		1.4 CITY		·				
TITLE	S CHIDIOTOPHED	☐ DELETE	2.1 TITLE					Change	Addition
NAME	WINTTER, CHRISTOPHER		2.2 NAM	_					
STREET ADDRESS	2239 HOLLYWOOD BLVD.		2.3 STRE		1		-	•	
CITY-ST-ZIP	HOLLYWOOD FL 33020	☐ DELETE	2. 4 CITY					. Change	☐ Addition
TITLE	SOSNA, JOSEPH	- OCCETE	3.1 TITLE			,			
NAME .	3301 NW 65TH ST		3.2 NAMI						
STREET ADDRESS	FT. LAUDERDALE FL 33309		3.3 STRE		- 1		4 . 5 . 5		
CITY-ST-ZIP TITLE	TT. CAUDENDALE PE 33309	☐ DELETE	3.4. CITY 4.1 TITLE		'	3			Addition
. 1			4. 2 NAM			, ,		-	, (), (4,00,00)
NAME STREET ADDRESS	••		4.3 STRE		IRESS				
CITY-ST-ZIP			4.4 CITY						
TITLE		☐ DELETE	5.1 TITLE		_			Change	Addition
NAME			5.2 NAME					_ •	<u> </u>
STREET ADDRESS			5.3 STRE	ET ADD	RESS				
CITY-ST-ZIP			5.4 CITY-	-ST-ZIP					
TITLE	7.50	☐ DELETE	6.1 TITLE			•		☐ Change	Addition
NAME			6.2 NAME	E		•			
STREET ADDRESS			6.3 STRE	ET ADD	RESS				

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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

FILED

Feb 09, 1999 8:00am

Secretary of State

02-09-1999 90007 016 ***150.00