ANNU	PROFIT PORATION JAL REPORT 1997		Secre Secre	ARTMENT OF STATE B. Mortham itary of State F CORPORATIONS	May 02 Secreta		
orporation	MENT # 5 FLYING SERVIC		(7)				
cipal Place of Business 6 SW 43RD LANE 41 FL 33175		13	Mailing Address 13226 SW 43RD LANE MIAMI FL 33175-3837				
					3, Date Incorporated or Qualifier 06/07/1978	d 3a. Date of 08/22/1	
incipal Pa	ace of Business	2a, 26	Mailing Address		4, FEI Number 59-1823481		Applied For Not Applicable
ille. Apt. 4	H, etc.		Suite, Apt. #, etc.	······································	5. Certificate of Status Desired		3.75 Additional Fee Required
ly & State	;	27	City & State		6. Election Campaign Financing	\$	5.00 May Be
)	Cour	28 11ry	Zip	Country	Trust Fund Contribution 8. This corporation has liability for		Added to Fees inder s. 199.032.
	25 Name and Add	29 ress of Current Regis	tered Agent	30	Florida Statutes 10. Name and Address of New	🖌 Yes 🔲 No)
	NA, MABEL H.			81 Name			<u></u>
6466					dress (P.O. Box Number is Not Accep	•	
) S.W. 79TH CT.			82 Street Ad	uress (P.O. box number is not Accep	lable)	
) S.W. 791H C1. MI FL 33143			82 Street Ad 83	uress (F.O. Box Number is Not Accep	(abie)	
MIAN Porsuant to	WI FL 33143	ctions 607.0502 and 6	07.1508, Florida Stat da Such change wat	83 84 City lutes, the above-named co	rooration submits this statement for th	FL 85	nging its registered
MIAN ursuant te flice or re gent. Lan ATURE	WI FL 33143 to the provisions of Sc egistered agent, or be in familiar with, and a	ections 607.0502 and 6 oth, in the State of Floric coept the obligations of the of registered agent and title OFFICERS AND DIREC	da Such change was I, Section 607.0505, I if applicable. (N	83 84 City lutes, the above-named co	rporation submits this statement for the ation's board of directors. I hereby acc	FL 85 e purpose of char cept the appointm DATE FICERS AND DIRI	nging its registered ent as registered
MIAX Ursuant to fhice or re gent. I ar ATURE	MI FL 33143 to the provisions of Sc egistered agent, or be in familiar with, and a source by recording and source by recording	oth, in the State of Florid ccept the obligations of Y's of registered agent and the OFFICERS AND DIREC	da Such change was I, Section 607.0505, I if applicable. (N 2TORS	83 84 City tutes, the above-named co s authorized by the corpor Fiorida Statutes. OTE: Registered Agent signature rec 13, 1.1 TILE 1.2 NAME	rporation submits this statement for the ation's board of directors. I hereby accurate when reinstating)	FL 85 e purpose of char cept the appointm DATE FICERS AND DIRI	nging its registered ent as registered ECTORS IN 12
MIAX Gristianit ti fhice or re gent. I an ATURE ATORESS	MI FL 33143 to the provisions of Sc egistered agent, or be in familiar with, and a 5 3 3 3 4 5 pro or princed mi S 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	oth, in the State of Florid ccept the obligations of Y's of registered agent and the OFFICERS AND DIREC	da Such change was I, Section 607.0505, I if applicable. (N 2TORS	83 64 City tutes, the above-named co s authorized by the corpor Florida Statutes. OTE: Registered Agent signature rec 13, 1.1 TITLE	rporation submits this statement for the ation's board of directors. I hereby accurate when reinstating)	FL 85 e purpose of char cept the appointm DATE FICERS AND DIRI	nging its registered ent as registered ECTORS IN 12
MIAX Gristianit ti fhice or re gent. I an ATURE ATORESS	MI FL 33143 to the provisions of Sc egistered agent, or bo in familiar with, and a 5 3 November of princet no 5 3 November of Science of Science 5 3 November of Science of Science of Science 5 3 November of Science of Science of Science 5 3 November of Science of Science of Science of Science 7 November of Science of Science of Science of Science 7 November of Science of Science of Science of Science of Science 7 November of Science of Sc	oth, in the State of Florid coupt the obligations of error of registered agent and blie OFFICERS AND DIREC	da Such change was I, Section 607.0505, I if applicable. (N 2TORS	83 84 City Lutes, the above-named co s authorized by the corpor Florida Statutes. OTE: Registered Agent signature rec 13: 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 City-ST-ZIP 2.1 TITLE	rporation submits this statement for the ation's board of directors. I hereby accurate when reinstating)	FL 35 a purpose of charce a provint cept the appoint a provint DATE C FICERS AND DIRI C	nging its registered ent as registered ECTORS IN 12
MIAN Gristianit to flice or re- gent. Lan ATURE- T-ZP	MI FL 33143 to the provisions of Sc egistered agent, or be m familiar with, and a S succer bend scientification PD HERA, ABEL JR. 18390 S.W. 1561 MIAMI FL STD SERNA, MABEL I 6400 S.W. 79TH	oth, in the State of Fiorie ccept the obligations of of registered agent and ble OFFICERS AND DIREC TH ST.	da Such change was I, Section 607.0505, I If sculkable (N CTORS DELETE	83 84 City tutes, the above-named co s authorized by the corpor Fiorida Statutes. KOTE: Registered Agent signature rec 13, 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 14 City-ST-ZIP	rporation submits this statement for the ation's board of directors. I hereby accurate when reinstating)	FL 35 a purpose of charce a provint cept the appoint a provint DATE C FICERS AND DIRI C	Iging its registered lent as registered ECTORS IN 12 Change Addition
MIAN Gristianit to fhice or re- gent. Lan ATURE	MI FL 33143 to the provisions of Sc egistered agent, or be m familiar with, and a S 30 Mar. https://www.and.ac S 30 Mar. https://www.and.ac S 30 Mar. https://www.and.ac S 30 Mar. https://www.and.ac PD HERA, ABEL JR. 18390 S.W. 1561 MIAMI FL STD SERNA, MABEL I	oth, in the State of Fiorie ccept the obligations of of registered agent and ble OFFICERS AND DIREC TH ST.	da Such change was I, Section 607.0505, I If sculkable (N CTORS DELETE	83 84 City tutes, the above-named co s authorized by the corpor Florida Statutes. OTE: Registered Agem signature rec 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 City-ST-ZIP 2.1 TITLE 2.2 NAME	rporation submits this statement for the ation's board of directors. I hereby accurate when reinstating)	FL 35 e purpose of char cept the appointm DATE FICERS AND DIRI	Iging its registered lent as registered ECTORS IN 12 Change Addition
MIAN Gristianit to flice or re- gent. Lar ATURE ADDRESS T-7/P ADDRESS T-7/P	MI FL 33143 to the provisions of Sc egistered agent, or be m familiar with, and a S succer bend scientification PD HERA, ABEL JR. 18390 S.W. 1561 MIAMI FL STD SERNA, MABEL I 6400 S.W. 79TH	oth, in the State of Fiorie ccept the obligations of of registered agent and ble OFFICERS AND DIREC TH ST.	da Such change was I, Section 607.0505, I If scrificable. (N CTORS DELETE DELETE	83 84 City tutes, the above-named coss authorized by the corpor Florida Statutes. OTE: Registered Agent signature rec 13, 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 City-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 City-ST-ZIP 3.1 TITLE 3.2 NAME	rporation submits this statement for the ation's board of directors. I hereby accurate when reinstating)	FL 35 e purpose of char cept the appointm DATE FICERS AND DIRI	Inging its registered lent as registered ECTORS IN 12 Change Addition
MIAN Urstizant to flice or regent. Lar ATURE ATURE ADDRESS 1. ZIP ADDRESS	MI FL 33143 to the provisions of Sc egistered agent, or be m familiar with, and a S succer bend scientification PD HERA, ABEL JR. 18390 S.W. 1561 MIAMI FL STD SERNA, MABEL I 6400 S.W. 79TH	oth, in the State of Fiorie ccept the obligations of of registered agent and ble OFFICERS AND DIREC TH ST.	da Such change was I, Section 607.0505, I If scrificable. (N CTORS DELETE DELETE	83 84 City tutes, the above-named co s authorized by the corpor Florida Statutes. OTE: Registered Agent signature red 13, 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 City-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 City-ST-ZIP 3.1 TITLE	rporation submits this statement for the ation's board of directors. I hereby accurate when reinstating)	FL 35 e purpose of char cept the appointm DATE FICERS AND DIRI	Inging its registered lent as registered ECTORS IN 12 Change Addition
MIAN Gristiant to flice or regent. Lan ATURE ADDRESS 1- ZIP ADDRESS	MI FL 33143 to the provisions of Sc egistered agent, or be m familiar with, and a S succer bend scientification PD HERA, ABEL JR. 18390 S.W. 1561 MIAMI FL STD SERNA, MABEL I 6400 S.W. 79TH	oth, in the State of Fiorie ccept the obligations of of registered agent and ble OFFICERS AND DIREC TH ST.	da Such change was I, Section 607.0505, I If scrificable. (N CTORS DELETE DELETE	83 84 City tutes, the above-named coss authorized by the corpor s authorized by the corpor Florida Statutes. OTE: Registered Agent signature rec 13, 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 City - ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 City - ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 City - ST-ZIP 4.1 TITLE	rporation submits this statement for the ation's board of directors. I hereby accurate when reinstating)	FL 35 a purpose of char cept the appointm DATE FICERS AND DIRI C C C C C C	Inging its registered lent as registered ECTORS IN 12 Change Addition
MIAN Gristiant to flice or regent. Lan ATURE ADDRESS 1- ZIP ADDRESS 1- ZIP	MI FL 33143 to the provisions of Sc egistered agent, or be m familiar with, and a S succer bend scientification PD HERA, ABEL JR. 18390 S.W. 1561 MIAMI FL STD SERNA, MABEL I 6400 S.W. 79TH	oth, in the State of Fiorie ccept the obligations of of registered agent and ble OFFICERS AND DIREC TH ST.	da Such change was I, Section 607.0505, I If scrivicable (IN CTORS DELETE DELETE DELETE	83 84 City tutes, the above-named coss authorized by the corpor Florida Statutes. OTE: Registered Agent signature rec 13, 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 City-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 City-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 City-ST-ZIP	rporation submits this statement for the ation's board of directors. I hereby accurate when reinstating)	FL 35 a purpose of char cept the appointm DATE FICERS AND DIRI C C C C C C	Inging its registered lent as registered
MIAN Gristiant to flice or regent. Lan ATURE: ADDRESS 1- ZP ADDRESS 1- ZP ADDRESS 1- ZP ACDRESS	MI FL 33143 to the provisions of Sc egistered agent, or be m familiar with, and a S succer bend scientification PD HERA, ABEL JR. 18390 S.W. 1561 MIAMI FL STD SERNA, MABEL I 6400 S.W. 79TH	oth, in the State of Fiorie ccept the obligations of of registered agent and ble OFFICERS AND DIREC TH ST.	da Such change was I, Section 607.0505, I If scruktable (N CTORS DELETE DELETE DELETE DELETE	83 84 City tutes, the above-named coss authorized by the corpor s authorized by the corpor Florida Statutes. OTE: Registered Agent signature rec 13, 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 14 City-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 City-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 City-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 City-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 City-ST-ZIP	rporation submits this statement for the ation's board of directors. I hereby accurate when reinstating)	FL 85 e purpose of char cept the appointm DATE FICERS AND DIRI C C C C C C C C C C C	Inging its registered lent as registered
MIAN Urstant to the or regent. Lar ATURE: ATURE: ADDRESS 1-7P ADDRESS 1-7P ADDRESS 1-7P ADDRESS	MI FL 33143 to the provisions of Sc egistered agent, or be m familiar with, and a S succer bend scientification PD HERA, ABEL JR. 18390 S.W. 1561 MIAMI FL STD SERNA, MABEL I 6400 S.W. 79TH	oth, in the State of Fiorie ccept the obligations of of registered agent and ble OFFICERS AND DIREC TH ST.	da Such change was I, Section 607.0505, I If scrivicable (IN CTORS DELETE DELETE DELETE	83 84 City suthorized by the corpor Florida Statutes. OTE: Registered Agent signature rec 13, 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 City-ST-2IP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 City-ST-2IP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 City-ST-2IP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 City-ST-2IP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	rporation submits this statement for the ation's board of directors. I hereby accurate when reinstating)	FL 85 e purpose of char cept the appointm DATE FICERS AND DIRI C C C C C C C C C C C	Inging its registered lent as registered
MIAN Urstuant to frice or re- gent. Lar ATURE- ADDRESS 1-7P ADDRESS 1-7P ADDRESS 1-7P ADDRESS 1-7P ADDRESS 1-7P ADDRESS	MI FL 33143 to the provisions of Sc egistered agent, or be m familiar with, and a S succer bend scientification PD HERA, ABEL JR. 18390 S.W. 1561 MIAMI FL STD SERNA, MABEL I 6400 S.W. 79TH	oth, in the State of Fiorie ccept the obligations of of registered agent and ble OFFICERS AND DIREC TH ST.	da Such change was I, Section 607.0505, I If scruktable (N CTORS DELETE DELETE DELETE DELETE	83 84 City Intels, the above named coss authorized by the corpor s authorized by the corpor Florida Statutes. OTE: Registered Agent signature rec 13, 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 City-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 City-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 City-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 City-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	rporation submits this statement for the ation's board of directors. I hereby accurate when reinstating)	FL 85 e purpose of char cept the appointm DATE FICERS AND DIRI C C C C C C C C C C C	Inging its registered lent as registered
MIAN Grsuant to flice or re- gent. Lar ATURE- ADDRESS 1-7P ADDRESS 1-7P ADDRESS 1-7P ADDRESS 1-7P ADDRESS	MI FL 33143 to the provisions of Sc egistered agent, or be m familiar with, and a S succer bend scientification PD HERA, ABEL JR. 18390 S.W. 1561 MIAMI FL STD SERNA, MABEL I 6400 S.W. 79TH	oth, in the State of Fiorie ccept the obligations of of registered agent and ble OFFICERS AND DIREC TH ST.	da Such change was I, Section 607.0505, I If scruktable (N CTORS DELETE DELETE DELETE DELETE	83 84 City Intels, the above named coss authorized by the corpor s authorized by the corpor Florida Statutes. OTE: Registered Agent signature rec 13, 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 City-ST-2IP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 City-ST-2IP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 City-ST-2IP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 City-ST-2IP 5.1 TITLE 5.2 NAME 5.1 NITLE 5.2 NAME	rporation submits this statement for the ation's board of directors. I hereby accurate when reinstating)	FL 85 e purpose of char cept the appointm DATE FICERS AND DIRI C C C C C C C C C C C C C C C C C C	Inging its registered lent as registered
MIAN Grsuant to flice or re- gent. Lar ATURE- ADDRESS 1-7P ADDRESS 1-7P ADDRESS 1-7P ADDRESS 1-7P ADDRESS 1-7P ADDRESS 1-7P	MI FL 33143 to the provisions of Sc egistered agent, or be m familiar with, and a S succer bend scientification PD HERA, ABEL JR. 18390 S.W. 1561 MIAMI FL STD SERNA, MABEL I 6400 S.W. 79TH	oth, in the State of Fiorie ccept the obligations of of registered agent and ble OFFICERS AND DIREC TH ST.	da Such change was I, Section 607.0505, I I scrubable (N CTORS DELETE DELETE DELETE DELETE DELETE	83 84 City B4 City s authorized by the corpor Florida Statutes. CITE: Registered Agent signature rec 13, 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 City-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 City-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 City-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 City-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 City-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 City-ST-ZIP 6.1 TITLE 6.2 NAME	rporation submits this statement for the ation's board of directors. I hereby accurate when reinstating)	FL 85 e purpose of char cept the appointm DATE FICERS AND DIRI C C C C C C C C C C C C C C C C C C	Inging its registered lent as registered ECTORS IN 12 Change Addition Change Addition Change Addition
MIAN Cirsuant to Prove or re- gent. Lan ATURE- AT	All FL 33143	oth, in the State of Flori coept the obligations of Coept the obligations of COFFICERS AND DIREC H ST. H. CT.	da Such change was I, Section 607.0505, I II BURGADIO TORS DELETE DELETE DELETE DELETE DELETE	83 84 City Lutes, the above named coss authorized by the corpor Florida Statutes. CITE: Registered Agent signature rec 13, 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 City-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 City-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 City-ST-ZIP 4.1 TITLE 4.2 NAME 3.3 STREET ADDRESS 3.4 City-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 City-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 City-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 City-ST-ZIP 6.1 TITLE 6.3 STREET ADDRESS 6.4 City-ST-ZIP	rporation submits this statement for the ation's board of directors. I hereby accurate when reinstating)	FL 85 e purpose of charcent the appointment of	Inging its registered lent as registered ECTORS IN 12 Change Addition Change Addition Change Addition Change Addition