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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 6

651293

(3)

SPECIAL AIR SERVICE CORPORATION

FILED									
Apr 03	1998	8:00am							
Secre	tary o	f State							

0.50**							
Principal Place of Business		Mailing Address				T TOURING BINDS AND FIRE STATE SERVE SHIN BILL BILL BILL BILL BILL BILL BILL BI	.011 01011 E1814 01014 01014 1044
13416 SW 128 ST MIAMI FL 33186		13416 SW 128 ST Miami Fl 33186					
US		US				DO NOT WRITE IN THI	S SPACE
						3. Date Incorporated or Qualified	
9 Principal D	lless of Business	0- 14-35- 4-14				11/08/1979	
<u> </u>	Place of Business	2a. Mailing Address				4. FEI Number	Applied For
Suite, Apt.	# 010	26 Suite, Apt. #, etc.				59-1950651	Not Applicable
22	#, d C.	27				5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	o .	Cily & State				6. Election Campaign Financing	\$5.00 May Be
23		28				Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Zip Country			8. This corporation owes or has paid the o	current year Intangible
24	25	29	30			Personal Property Tax due June 30.	
	9. Name and Address of Curr	ent Registered Agent				10. Name and Address of New Registers	d Agent
IZG	IUIERDO, RAUL			81	Name		
194	XOKANKENDADK-DB-YMON- 13	14165W 12851	t	62	Street Addre	ss (P.O. Box Number is Not Acceptable)	
ļ MIA	MIFL 38450 33186			00			
				83			
				84	City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607 1508, Florida Stati	utes, the al	bove-	named corpo	ration submits this statement for the nurnose	of changing its registered
office or r	egistered agent, or both, in the Sta im familiar with, and accept the obl	te of Florida. Such change was	s authorize:	d by 1	the corporatio	on's board of directors. I hereby accept the ap	ppointment as registered
SIGNATURE	and a second the second	ganona on cooper con .0000, 1	TOTICA CIA	iuica.			
SIGNATURE	Signature, typod or printed name of registered a	agent and title if applicable (NO	OTE: Registered	d Agent	signature required	d when reiostating) DATE	
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AT	ND DIRECTORS IN 12
TITLE	VSD	DELETE	1.1 10	TLE .			Change Addition
NAME	IZQUIERDO, IGNACIO		1.2 N/	AME			
STREET ADDRESS	13416 SW 128 ST		1.3 ST	TREET A	DDRESS		
CITY-ST-ZIP	MIAMI FL 33/86		14 CI	TY-ST-	ZIP		
TITLE	PTD	☐ DELETE	2 1 TF	TEF			Change Addition
NAME	IZQUIERDO, RAUL		2 2 N/	AME			
STREET ADDRESS	13416 SW 128 ST		2.3 \$1	IRFET AL	DDRESS		
CITY-ST-ZIP	MIAMI FL 33/86	Potiete		12-YI	- ZIP		
TITLE		DELETE	3.1 717				☐ Change ☐ Addition
NAME CYCLET ADDRESS			3.2 NA				
STREET ADDRESS					DDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. Cl	JTY- ST-	- 219		Change Addition
NAME		Ditti	4. 2 N				Change Addition
STREET ADDRESS					DORESS		
CITY-ST-ZIP				HEET AL TY-ST-			,
THTLE		DELETE	5.1 TH		rn.		Change Addition
NAME		 · - -	5.2 NA		1		
STREET ADDRESS					DDRESS		
CITY-ST-ZIP				TY-ST-			
TITLE		DELETE	6.1 Til				☐ Change ☐ Addition
NAME			6.2 NA				
STREET ADDRESS			1		DDRESS		
CITY-ST-7IP			1	17.51.	I		

14. Thereby 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.

CIONATURE.

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