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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 854222

(7)

ADVENTURE FLIGHTS, LTD., INC.

FILED
Apr 29 1997 8:00am
Secretary of State

	er <b>ro</b> ad International airport	Mailing Address  E.M. BUD MOLT ADVENTURE FLIGHTS  P.O. BOX 17550 3200 SUMMIT BLVD.							
WEST PALM BEACH 33406		WEST PALM BEACH FL 33416-7560 US		3	. Date Incorporated or Qualified 09/29/1982		e of Last Report		
<del></del>	ace of Business	2a. Mailing Address			4	, FEI Number	- <del>1</del>	Applied For	
21		26				<u>51-0213370</u>		Not Applicab	
Suite, Apt. :	♥, etc.	Suite, Apt. #, etc.			5	, Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State		City & State	<del></del>		6	. Election Campaign Financing		\$5.00 May Be	
23		28				Trust Fund Contribution	Ц	Added to Fees	
Zip Country		Zip Country			8	8. This corporation has liability for intangible tax under s. 199.032,			
24	g. Name and Address of Curre		30			Florida Statutes L  Name and Address of New Re		·	
NO	.T, E.M. BUD	in nogistored Agent	81	Name	<del></del>	, rumo and Addiess of flow no	Ristolog Vi	30111	
	ENTURE FLIGHTS P.O. BIX 179	sen .							
	) SUMMIT BLVD.	<b>700</b>	<b>82</b> Str		. Address (	dress (P.O. Box Number is Not Acceptable)			
	ST PALM BEACH FL 33416		83						
****	TALII DEAGITTE GOTTO								
			84	City			FL	85 Zip Code	
office or re agent. I as SIGNATURE	o the provisions of Sections 607.05 egistered agent, or both, in the Stati in familiar with, and accept the obliq	e of Florida. Such change was au gations of, Section 607.0505, Flor	uthorized by rida Statutes	the corp	rporation's	board of directors. Thereby acces	ot the appoi	hanging its registered intment as registered	
	Signature, typed or printed name of registered ac		Registered Age	nt signature			DATE:	0,0000000000000000000000000000000000000	
12.	PD OFFICERS AP	ND DIRECTORS DELETE	13.	<del></del>	<del></del>	ADDITIONS/CHANGES TO OFFIC		DIRECTORS IN 12  Change Additi	
NAME	MOLT, EMERSON M	CJ ottile	1.2 NAME					_ Change Room	
STREET ADORESS	3200 SUMMIT BLVD.		1.3 STREET	ADDIN CC					
CITY-ST-ZIP	WEST PALM BEACH FL		1.4 CITY - S						
TITLE	STD	DELETE	2.1 THE	1-211	+		Т	Change Additi	
NAME	BARTLEY, EVELYN	<b>—</b> · · ·	2.2 NAME				-		
STREET ADDRESS	3200 SUMMIT BLVD.		2.3 S1REE1	ADDRESS					
CITY-ST-ZIP	WEST PALM BEACH FL		2. 4 CHY- 9						
TITLE	VD	DELETE	3.1 TITLE				[	Change Additi	
NAME	STEVENS, EDWARD		3.2 NAME						
STREET ADDRESS	3200 SUMMIT BLVD.		3.3 STREET	ADDRESS					
CITY-ST-ZIP	WEST PALM BEACH FL		3.4. C(TY - 5	ST- 21P					
TITLE	-	☐ DELETE	4.1 TITLE					Change Additi	
NAME			4. 2 NAME						
STREET ADDRESS			4.3 \$1REET	ADDRESS					
CITY-ST-ZIP			4.4 CHY-S	I - ZIP			<del></del>		
TITLE		☐ DELETE	5.1 TITLE				L	Change	
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREET						
CITY-ST-ZIP TITLE		DELETE	5.4 CHY-S 6.1 TITLE	I - ZIP	<del> </del>	<del></del>		Change Additi	
NAME		☐ prrrst	6.2 NAME				L	T AUGUST T WOULD	
STREET ADDRESS			6.3 STREET	ADDECC					
CITY-ST-ZIP			6.4 CITY-S						
14. I do heret	y certify that the information supplie	ed with this filing does not qualify	for the exe	mption s	stated in S	ection 119.07(3)(i), Florida Statute	s. I further	certify that the	
I am an of	n indicated on this annual report or ficer or director of the corporation of a Block 12 or Block 13 it changed	or the receiver or trustee empower of on an attachment with an addr	ered to exec ress.	ute this	id that my s report as i	required by Chapter 607, Florida S	Statutes; and	d that my name	