FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

\$200 - N/C

1996

DOCUMENT #

F72010

(4)

COMP	ASS AVIATION INTERNA	TIONAL CORP.							
Principal Place o	of Business	Mailing Address					DII qi il a iibil	OFOR CIVIL D	AN SIAN DIBN IDD
			15110 GARVOCK PL MIAMI LAKES FL 33016						
a en la cella						3. Date Incorporated or Qualified 03/15/1982	3a. Da	le of Last F 01/17/1	1995
2. Principal Plac	ce of Business	2a. Mailing Address	 						Applied For
21] Suite, Apt. #,	. etc.	Suite Aot # etc	Suite, Apt. #, etc.		¢0.75 Au		Not Applicable		
22	, ••••	27				5. Certificate of Status Desired			Required
Gity & State		City & State	⊢ , ′			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Ziρ	Country	Zip	Cou	untry		8. This corporation has liability for		lax under s	199.032,
24	[25]	29	30	1		<u> </u>	□ No		H
	9. Name and Address of Curr	ent registered Agent		81	Name	10. Name and Address of New F	egistered	Agent	
DADO	EDHADDO C								
BARO, EDUARDO C. 15110 GARVOCK PL				82	Street Addre	ass (P.O. Box Number is Not Acceptat	ole)		
MIAMI LAKES FL 33016				83					
MIN MAIL E	JANEO I E 00010								
				84	City		FI	_ 85 Z	ip Code
familiar with SIGNATURE	of agent, or both, in the State of His i, and accept the obligations of, S∈ instruction parted hane of registered ag	ection 607.0505, Florida Statute:	3.		oration's board	d of directors. I hereby accept the app	ointment a	s registered	j agent. I am
12.	OFFICERS A	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	ICERS AN	D DIRECTO	ORS IN 12
TITLE	P	DELETE	1 11	TITLE				☐ Change	☐ Addition
NAME	BARO, EDUARDO C.		1.2 NAME						
STREET ADDRESS	15110 GAVOCK PL				ADDRESS				
City St Ziff	MIAMI LAKES FL	T) DELETE	1.4 CITY - 2 1 TITLE		1-2IP			Change	☐ Addition
NAME	BARO, EDUARDO G.		2 2 NAME 2 3 STREET					[] Change	☐ Addition
STREET ADDRESS	9425 SW 6TH TERR				ADORESS				
C-14-S1-2IP	MIAMI FL			HTY-S	į				
THEF	\$	DELFTE	3 1 TITLE				·······	☐ Change	☐ Addition
NAME:	BARO, REBECCA K.		321	IAME					
STREET ADDRESS	15110 GAVOCK PL			CIOCCI	I ADDRESS				
0-1 y - ST - 7 P	MIAMI LAKES FL		3.3.3	SIREE					
	MINANI ENICO I E	E profit	340	iTY-S	iT-ZIP				
TIFLE	WINNER FULLO I F	☐ DELETE	3 4 C	OTY-S TITLE	iT-ZIP			☐ Change	☐ Addition
TIFLE	MINANI ENICOTE	☐ DELETE	340 41 42N	DITY-S TITLE NAME			- 4	☐ Change	Addition
NAME STREET ADDRESS	mirani Danco i L	☐ DELETE	34 C 4 1 1 42 N 4.3 S	DITY-S TITLE NAME STREET	ADDRESS			☐ Change	Addilion
TIFLE NAME	mirati parco y c	☐ DELETE	340 41 42N 43S	DITY-S TITLE NAME	ADDRESS			☐ Change	☐ Addition
NAME STREET ADDRESS GIT+ ST-ZIP	mount parte y t		34 C 4 1 4 2 N 4 3 S 4 4 C 5 1	DITY-S TITLE NAME STREET	ADDRESS				
THEE NAME SHEEL ADDRESS CHY-ST-ZP TITLE	mont party t		34 C 4 1 4 2 N 4 3 S 4 4 C 5 1	DITY - S TITLE NAME STREET DITY - S TITLE NAME	ADDRESS				
DIFLE NAME STREET ADDRESS OFF-ST-ZOF TIPLE NAME	mont concept t	☐ DELETE	34 C 4 1 42 N 43 S 44 C 5 1 52 N 53 S	CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET	ADDRESS 57 - ZIP			☐ Change	Addition
MILE NAME STREET ADDRESS COTY ST-ZOT THE NAME STREET ADDRESS COTY ST-ZOT THE	mirani princo y t		34 C 4 17 4 2 M 4 3 S 4 4 C 5 7 5 2 M 5 3 S 5 4 C 6 1	DITY-S TITLE HAME GIREET GITY-S TITLE HAME GITY-S TITLE	ADDRESS 57-ZIP ADDRESS				Addition
THEE NAME SHEEL ADDRESS CHY-SE-ZP THEE NAME SHEEL ADDRESS CHY-SE-ZP THEE NAME NAME	miran princey t	☐ DELETE	34C 411 42h 43S 44C 51 52h 53S 54C 61	DITY-S TITLE HAME GIREET GITY-S TITLE HAME GITY-S TITLE HAME	ADDRESS ADDRESS ADDRESS ADDRESS			☐ Change	Addition
MILE NAME STREET ADDRESS COTY ST-ZOT THE NAME STREET ADDRESS COTY ST-ZOT THE		☐ DELETE	34C 411 42M 43S 44C 511 52M 53S 54C 611 62M	CITY-S DITLE NAME GIREET TITLE NAME GIREET TITLE NAME GIREET NAME GIREET NAME GIREET	ADDRESS 57-ZIP ADDRESS			☐ Change	Addition

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.

SIGNATURE: - ⟨

COWNERDO C. PARO 1-18-96 305-538-1057
EN OR DIRECTOR
Destructor