

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

10f2.

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F96000001577 (3)

1. Corporation Name
OVIATION AVIATION INC.

FILED
97 AUG -6 AM 11: 03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
4904 LONDONDERRY DRIVE
TAMPA FL 33647

Mailing Address
4904 LONDONDERRY DRIVE
TAMPA FL 33647

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 5511 NE 31ST AVE

2a. Mailing Address

26 5511 NE 31ST AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 FT. LAUDERDALE FL

City & State

28 FT. LAUDERDALE FL

Zip

24 33308

Country

25 USA

Zip

29 33308

Country

30 USA

3. Date Incorporated or Qualified

03/28/1996

3a. Date of Last Report

4. FEI Number

59-3357874

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

WILKINSON, BRUCE W
5020 GUNN HWY - STE 210
TAMPA FL 33624

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PSCD
TOLLIVER, RONALD L
4904 LONDONDERRY DRIVE
TAMPA FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
TOLLIVER, JOAN L
4904 LONDONDERRY DRIVE
TAMPA FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do 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.

CR2E034 (4/97)

2082

July 27, 1997

Florida Department of State
Annual Reports Section
PO Box 1500
Tallahassee, FL 32302

Dear Sir or Madam:

I have received the "2nd Notice" for the 1997 Profit Corporation Annual Report. I did not receive the first notification which could be related to the fact that I moved from my previous Tampa address to Ft. Lauderdale. All of my mail has been forwarded by the Post Office to the new address including the 2nd Notice. However, it appears that the first notification was not forwarded.

This should not have been a problem as I mailed a notification of change of address to the Florida Department of State in December of 1996. A copy of that letter is attached.

Given this set of circumstances, I respectfully request that the \$385 late fee be waived. I can be reached at the following address and telephone numbers.

Ron Tolliver
5511 NE 31st Ave.
Ft. Lauderdale, FL 33308
305-372-8722 - Work
954-772-5191 - Home

Please reflect the correct address in records.

Sincerely,



Ron Tolliver