

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 23, 1999 8:00 am
Secretary of State

03-23-1999 90035 037 ***150.00

DOCUMENT # F96000001651

1. Corporation Name

CUSTOM AIR TRANSPORT, INC.

Principal Place of Business

4101 RAVENSWOOD RD
STE 214
FT LAUDERDALE FL 33315
US

Mailing Address

4101 RAVENSWOOD RD
STE 214
FT LAUDERDALE FL 33315
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/02/1996

4. FEI Number

88-0334645

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

DEATON, SHERRY
4101 RAVENSWOOD ROAD, STE 214
FT LAUDERDALE FL 33312

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

33156

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

3-18-99

12. OFFICERS AND DIRECTORS

TITLE CP ☐ DELETE

NAME WELLMAN, RICHARD R
STREET ADDRESS 7540 LOCHNESS DR
CITY-ST-ZIP MIAMI LAKES FL 33014

TITLE ST ☒ DELETE

NAME LINDLEY, GUY T
STREET ADDRESS 411 LIGHTHOUSE DR
CITY-ST-ZIP PALM BEACH GARDENS FL 33410

TITLE D ☒ DELETE

NAME DUCKWORTH, THOMAS O
STREET ADDRESS 13800 SW 14TH STREET
CITY-ST-ZIP DAVIE FL 33325

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

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

CEO AND DIRECTOR
ANTHONY C. ROMEO
440 COSTANERA ROAD
CORAL GABLES, FL 33143

SEC/TREAS
CAROLINA ARAGON
9100 S. DADELAND BLVD., Suite 1220
MIAMI, FL 33156

14. I 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/18/99 (305) 670-7783

0296083

CR2F034 (11/98)