

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

FILED
May 04 1998 8:00am
Secretary of State

DOCUMENT # F97000005002 (7)

1. Corporation Name

AVIATRIX AN AIRLINE CONSULTING COMPANY

Principal Place of Business

5239 MAJORCA CLUB DR.
BOCA RATON FL 33486

Mailing Address

5239 MAJORCA CLUB DR.
BOCA RATON FL 33486

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/24/1997

4. FEI Number

52-2049876

☒ 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

2. Principal Place of Business

The Jet Center

2a. Mailing Address

Aviatrix

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 1100 Lee Wagener Blvd

27 The Jet Center

City & State

City & State

23 Fort Lauderdale

28 1100 Lee Wagener Blvd

Zip

Country

Zip

Country

24 FL 33315

25 USA

29 FL 33315

30 USA

9. Name and Address of Current Registered Agent

MORGAN-RICH, LESLEY
5239 MAJORCA CLUB DR.
BOCA RATON FL 33486

10. Name and Address of New Registered Agent

81 Name Lesley MORGAN-RICH

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

7921 Palacio Del Mar

83 Boca Raton

84 City

85 Zip Code

FL 33433

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

CCEO
MORGAN-RICH, LESLEY
5239 MAJORCA CLUB DR.
BOCA RATON FL 33486

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

P
SMALARZ, JOANN
2119 TIPTREE CIRCLE
ORLANDO FL 32837

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TCFO
ROSSY, LARAINÉ
8032 SANIBEL DR.
TAMARAC FL 33321

☒ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

CCEO

MORGAN-RICH LESLEY

7921 Palacio Del Mar

Boca Raton FL 33433

☒ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

P

JOANN Smalarz

6724 Canary Palm Circle

Boca Raton FL 33433

☒ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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.

SIGNATURE:

Lesley Morgan-Rich

April 21

1998

954-359-
8939

CR2E034 (10/97)