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* = PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F98000005816

1. Corporation Name

May 24, 1999 8:00 am Secretary of State

05-24-1999 90034 001 *7,800.00

AIHCHAF								
Principal Place		Mailing Address						
9420 SW 77TH MIAMI FL 33156		9420 SW 77TH AVENUE MIAMI FL 33156						
						WRITE IN THIS	SPACE	
					3. Date Incorporated or Quali 10/19/1998	ifed		
2. Principal Pl	ace of Business	2a. Mailing Address			1	5-087019	7/ Ap	plied For
		c/o		APPLIED FOR		No	t Applicabl	
ICAPITAL CORPORATION		UNICAPITAL CORPORATION		5. Certifcate of Status Desire	d 🗆	\$8.75		
11 BISCAYNE BOULEVARD		10800 BISCAYNE BOULEVARD				Fee Re	•	
TE 800		STE. 800		Election Campaign Financ Trust Fund Contribution	ing 🗆	\$5.00 Added t		
IIAMI, FL 3	33161				Trust Fund Contribution			o rees
		MIAMI, FL 33161			B. This corporation owes the Personal Property Tax.	current year inte	Marie Maries	□No
	9. Name and Address of Curre	nt Registered Agent	·•·		10. Name and Address of Ne	w Registered A		
		<u> </u>	81	Name				
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD			82	Chant Add-	Address (P.O. Box Number is Not Acceptable)			
			82	Street Addre	ess (P.O. Box number is Not Acc	eptable)		
PLAN	NTATION FL 33324		83					
							10-11-50-0	
			84	City		FL	85 Zip (Code
office or re	o the provisions of Sections 607.05 agistered agent, or both, in the State in familiar with, and accept the oblig-	e of Florida. Such change was aut	horized by th	named corpo ne corporatio	oration submits this statement for n's board of directors. I hereby a	the purpose of o ccept the appoir	changing its itment as re	registered gistered
office or re agent. I ar SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the oblig Signature, typed or printed name of registered ag	e of Fiorida. Such change was auti- ations of, Section 607.0505, Floric ent and title if applicable. (NOTE: R	horized by the da Statutes.	ne corporation	n's board of directors. I hereby a	DATE	itment as re	gistered
office or reagent. I ar SIGNATURE 12.	egistered agent, or both, in the State in familiar with, and accept the oblig Signature, typed or printed name of registered ag OFFICERS A	ent and title if applicable. (NOTE: R ND DIRECTORS	horized by the la Statutes. Registered Agent 6	ne corporation	n's board of directors. I hereby a	DATE	D DIRECTO	RS IN 12
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I nereby 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 informatic 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 in hanged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Daytime Phone #

562378-90016-18 #F980000) 5816

LIST OF OFFICERS & DIRECTORS FOR CAUFF, LIPPMAN AVIATION, INC. (a Florida corporation)

THE BUSINESS ADDRESS FOR THE FOLLOWING OFFICERS & SOLE DIRECTOR IS c/o UNICAPITAL CORPORATION, 10800 BISCAYNE BLVD., LAW DEPT., MIAMI, FLORIDA, 33161:

SOLE DIRECTOR:

CHAIRMAN OF THE BOARD:

VICE PRESIDENT & TREASURER:

PRESIDENT & CHIEF EXECUTIVE

OFFICER:

EXECUTIVE V.P. & CHIEF

OPERATING OFFICER:

VICE PRESIDENT:

VICE PRESIDENT:

VICE PRESIDENT:

EXECUTIVE V.P. & SECRETARY:

ASSISTANT SECRETARY:

ASSISTANT SECRETARY:

Robert J. New

Robert J. New

Jonathan New

Stuart Cauff

Wayne Lippman

Daniel Chait

David Vorrath

Richard Giles

Martin Kalb

C. Deryl Couch

Teri M. Trimmer