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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G15805 (6)

FLYING W. INC.

FILED
Apr 21 1997 8:00am
Secretary of State

FLYING	W, INC	00					
Principal Place of Business Mailing Address BOX 1673 FT LAUDERDALE FL 33302 BOX 1673 FT LAUDERDALE FL 33302-1673						TIFF ATEN BIAIS BIAIT BIBIT	
US	EL IC SOOL	US	E-1010				
					3. Date Incorporated or Qualified		
2. Principal Place of Business 2a. Mailing Ad					12/23/1982 4. FEI Number	04/26/19	·/···
2. Principal P	race or business	 1	2a. Mailing Address				Applied For
Suite, Apt	#, etc.	Suite, Apt. #, etc.			59-2238867	\$8:	Not Applicable 75 Additional
22		27		5. Certificate of Status Desired		e Required	
City & Stat	e	City & State		6. Election Campaign Financing	\$5.	.00 May Be	
3		28			Trust Fund Contribution		ded to Fees
Zip	Country	Zip Country		8. This corporation has liability for intangible tax under s. 199.032,			
24	9. Name and Address of Cur		29 30		Florida Statutes 10. Name and Address of New I	Yes No	
LAMA		tent uedisteien võetti	81	Name	TU. Name and Address of New F	registered Agent	
WINER, RICHARD A. 712 S.W. 4TH PL.				Name			
	LAUDERDALE FL 33312			82 Street Address (P.O. Box Number is Not Acceptable)		able)	
	CHÁDEIDARE I E 000 IE		83				
			84	City		FL 85	Zip Code
SIGNATURE	Signature, typed or printed name of registered	agent and tille if applicable. (NOT)	E: Registered Ag	ont signature requi	rod when reinstating)	DATE	TODO IN 40
TITLE	PVT	DELETE	1.1 30 LE		ADDITIONS/CHANGES TO OFF	Char	
NAME	WINER, RICHARD A.	<u></u>	1.2 NAME				igo 🗀 i sanion
STREET ADDRESS	712 SW 4TH PL			T ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CiTY-	ST-7IP			
TITLE	\$ D	DELETE	2.1 TITLE			☐ Char	nge 🔲 Addition
NAME	WINER, RICHARD A.		2.2 NAME		,		
STREET ADDRESS 712 SW 4TH PL		2.3 STREET ADDRESS					
CITY-ST-ZIP TITLE	FT. LAUDERDALE FL	DELETE	2.4 CITY-	SI - ZIP		Char	nge Addition
NAME		L) Dett if	3.1 TITLE 3.2 NAME			Cuar	ige L.J Kudikon
STREET ADDRESS	*		1	T ADDRESS			
CITY-ST-ZIP			3.4. City-				
TITLE		DELETE	4.1 TITLE	J. 4.11		☐ Char	nge Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	T ADDRESS			
CITY-ST-ZIP			4.4 CITY-	S1 - 21P			
TITLE		DELETE	5.1 TITLE		•	☐ Char	nge 🗌 Addition
NAME			5.2 NAME	1			
STREET ADDRESS			1	ADDRESS			
CITY-ST-ZIP TITLE	DELETE		54 CITY-1	S1 - 71P		T 05	nge Addition
NAME		ריי מננינ	6.1 TITLE 6.2 NAME	-		L Char	iğe 🔲 Additigü
STREET ADDRESS				ADDRESS			
DIRECT PODICES			U.S OINEE	i vonuceo I			

6.3 STREET ADDRESS
6.4 CITY-S1-ZIP
14. It 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 an an attachment with an address.