2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2003 8:00 am
Secretary of State

02-21-2003 90218 020 ***150.00

DOCUMENT # G44823

1. Entity Name
ATSG CO.

Principal Place of Business
9200 S DADELAND BLVD #720
MIAMI FL 33156

Mailing Address
9200 S DADELAND BLVD #720
MIAMI FL 33156

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip | Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip | Country

4. FEI Number 59-2302298 | Applied For | Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DEVLIN, KIM
9200 S DADELAND BLVD #720
MIAMI FL 33156

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City | FL | Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DCP	☒ Delete
NAME	CHERRNAY, ROBERT	
STREET ADDRESS	9875 SW 93RD AVE	
CITY-ST-ZIP	MIAMI, FLC 00000	
TITLE	T	☐ Delete
NAME	DEVLIN, KIMBERLY	
STREET ADDRESS	16031 SW 286 STREET	
CITY-ST-ZIP	MIAMI FL	
TITLE	S	☒ Delete
NAME	CHERRNAY, PAULINE	
STREET ADDRESS	9875 SW 93RD AVE	
CITY-ST-ZIP	MIAMI FL 33176	
TITLE	V	☐ Delete
NAME	ENGLAND, DALE	
STREET ADDRESS	9711 N FARM RD STE 205	
CITY-ST-ZIP	FAIR GROVE M 65648	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	☐ Change ☒ Addition
NAME	COLONNA, WAYNE	
STREET ADDRESS	6244 SW 127TH CT.	
CITY-ST-ZIP	MIAMI, FL 33183	
TITLE	TSD	☒ Change ☐ Addition
NAME	DEVLIN, KIMBERLY	
STREET ADDRESS	16031 SW 286TH ST.	
CITY-ST-ZIP	HOMESTEAD, FL 33033	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	CDL	☒ Change ☐ Addition
NAME	ENGLAND, DALE	
STREET ADDRESS	9711 N. FARM RD. 205	
CITY-ST-ZIP	FAIR GROVE, MO 65648	
TITLE	PL	☐ Change ☒ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kimberly Devlin / Kimberly Devlin — February 18 2003 — 305 670 4161

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/02)