

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

FILED
Jun 09 1997 8:00am
Secretary of State

DOCUMENT # G69898

(6)

1. Corporation Name
C.A.F. AIRLINE CORPORATION

NC
5-8-96

Principal Place of Business
1150 NW 72 AVE., SUITE PH
MIAMI FL 33126
US

Mailing Address
1150 NW 72 AVE., SUITE PH
MIAMI FL 33126
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified
10/21/1983

3a. Date of Last Report
05/08/1996

4. FEI Number

59-2343771

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

ROJAS STEWART, RICARDO A
1150 NW 72 AVE., SUITE PH
MIAMI FL 33126

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

Zip Code

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 DP
NAME ROJAS STEWART, RICARDO A
STREET ADDRESS 1150 NW 72 AVE PH
CITY-ST-ZIP MIAMI FL

☒ DELETE

TITLE DV
NAME ESPINOZA TIRADO, JORGE R
STREET ADDRESS 1150 NW 72 AVE PH
CITY-ST-ZIP MIAMI FL

☒ DELETE

TITLE DS
NAME STEINMANN, MAURICIO
STREET ADDRESS 1150 NW 72 AVE PH
CITY-ST-ZIP MIAMI FL

☒ 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 DP
1.2 NAME ROBERTO LEIGH RIVEROS
1.3 STREET ADDRESS 1150 NW 72 AVENUE PH
1.4 CITY-ST-ZIP MIAMI FL 33126

☐ Change

☒ Addition

2.1 TITLE DV AND DS
2.2 NAME ALBERTO MANDRIOTTI
2.3 STREET ADDRESS 1150 NW 72 AVENUE PH
2.4 CITY-ST-ZIP MIAMI FL 33126

☐ 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 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 on an attachment with an address.

SIGNATURE:

[Signature]

4/18/97. (305) 626-5903

CR2E034 (9/96)