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

DOCUMENT #

(7)

GENERAL AVIATION INTERNATIONAL CORP.

FILED May 08 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address			
14532 S.W. 129TH ST. MIAMI FL 33186 US		P. O. BOX 164924 MIAMI FL 33116 US	MIAMI FL 33116		DO NOT WRITE IN THIS SPACE
08		V3			3. Date Incorporated or Qualified
					05/16/1985
2. Principal P.	lace of Business	2a, Mailing Address			4. FEI Number Applied For
21		26			59-2539612 Not Applicable
Suite, Apt.	#, etc	Suite, Apt #, etc.			SR 75 Additional
22		27	27		5. Certificate of Status Desired Fee Required
City & State		City & State	City & State		6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zíp	Coun	try	8. This corporation owes or has paid the current year Intangible
24	25		30		Personal Property Tax due June 30. Yes No
9. Name and Address of Current Registered Agent VALUE CITIESTO 81 Name					10. Name and Address of New Registered Agent
	aldes, Eusebio		•	11 Name	
	5070 SW 103 LANE #2202		8	Street /	Address (P.O. Box Number is Not Acceptable)
_M	IAMI-FL-33198		Ļ	1453	52 5.W.129 Street
			16	3]	į
			ε	I4 City	85 Zig Code ,
				Wi	iam'i FL 33186
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 + Poure bio Valder Eugebio Valdes 2/23/99					
12.		AND DIRECTORS	13.	Agent signature	e required when reinstating) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
TITLE	DP OF TOTAL	DELETE	1.1 TITL	F	Change Addition
NAME	VALDES, EUSEBIO		1.2 NAM		1 — · · · · · · · · · · · · · · · · · ·
STREET ADDRESS	-15070-SW-103-LANE #2	202		ET ADDRESS	14532 5.W.129 51 eet 18
CITY-ST-ZIP	MIAMI FL			- ST- ZIP	14532 5.W.129 street mani, Fl. 33/86
TITLE		DELETE	2.1 TITU	51-211	Change Addition
NAME			2.2 NAM	E	
STREET ADORESS			2 3 STRE	ET ADDRESS	
CITY-ST-ZIP				r-ST-ZIP	
TITLE		DELETE	3.1 7171		Change Addition
NAME			3.2 NAM	Ε	
STREET ADDRESS			3.3 STRE	E1 ADDRESS	
CITY-ST-ZIP			3.4. CITY	/- S1 - ZIP	
TITLE		DELETE	4.1 TITU		☐ Change ☐ Addition
NAME			4. 2 NAN	1E	
STREET ADDRESS			4.3 STRE	ET ADDRESS	
CITY-ST-ZIP			4.4 CITY	-ST-ZiP	
TITLE		☐ D€-LETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAM	E	
STREET ADDRESS			5.3 STRE	ET ADDRESS	
CITY-ST-ZIP			5.4 CITY	- S1 - 71P	
TITLE		DELETE	6 1 TITLE		Change Addition
NAME			62 NAM	E	
STREET ADDRESS			6.3 STRE	et address	
CITY-ST-ZIP		_	6.4 CITY	· ST - ZIP	
14 I hereby c	ortification information complete	Livito this filing doce not qualify for	the ever	option state	ed in Section 119 07(3)(i) Florida Statutes I further certify that the information

rivereby serving manine information supplied with this little 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.