FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT . CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Saridra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

H66240 **DOCUMENT #**

(3)

AIR TAXI INTERNATIONAL, INC.

19740 W ST ANDREWS DR	19740 V
Principal Place of Business	Mailing Add

19740 W. ST. ANDREWS DR.



			. 33015						
						3. Date Incorporated or Qualifie			
						07/15/1985	10	/16/18	
2. Principal Pla	lace of Business	2a. Mailing A	ddress			4, FEI Number			Applied For
<u> </u>		26				59-2735608			Not Applicable
Suite, Apt.	#, etc.	Suite, Ap	t. #, etc.			5. Certificate of Status Desired			Additional Required
City & State	е	City & St	ate			6. Election Campaign Financing			🕽 Мау Ве
3		28				Trust Fund Contribution		Added	to Fees
Ζφ	Country	Zip		Countr	У	8. This corporation has liability t		under s	199.032,
4	25	29		30			res 🗌 No		
	g. Name and Address	of Current Registered Age	ent			10. Name and Address of Nev	v Registered Ag	ent	
				8	Name				
BANDE	ERAS, J. F.			8:	2 Street Addr	ess (P.O. Box Number is Not Accep	table)		
	W. ST. ANDREWS DR.				l				
	FL 33015			8:	3				
·····				8-	4 City			85 Zig	o Code
				-	1 7		FL		
11. Pursuant	to the provisions of Sections	607.0502 and 607.1508, F	lorida Statutes	, the above	named corpo	ration submits this statement for the	purpose of charg	ging its r	egistered office
	ered agent, or both, in the Sta with, and accept the obligation			a by the cor	poration's boa	ration subtrities this statement for the arrd of directors. I hereby accept the a	фронилен аз н	gistered	agent. ram
SIGNATURE	Signature typical or printed name of re-	gistered aged and tilk if applicante	(NOTE	Registered Ag	ent signature require	d when reinstaling)	DATE		
12.	OFF1	CERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO (
irile	PT		DELETE	1. 1 TITL	F			Change	Addition Addition
NAME	BANDERAS, J. F.			1,2 NAMI	F				
STREET ADDRESS	19740 W. ST. AND	rews dr		13 5 181	ET ADDRESS				
				1.3 31112					
011v - ST - 7IP	MIAMI FL			1.5 SINC	-ST-ZIP				
C'TY-ST-ZIP			DELETE					Change	Addition
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THEF NAME STREET ADDRESS DITY+ST-76P) DELETE	1 4 CITY 2 1 THTL 22 NAM 23 STRE	E E Et address - St-Zip			Change Change	Addition
THEF NAME SPREEL ADDRESS CHY-S1-76P THEF				1 4 C(TY) 2 1 THL 22 NAM 2 3 STRE 2 4 C(TY)	E E ET ADDRESS - ST - ZIP E				
TITLE NAME STREET ADDRESS CHY-ST-78P TITLE NAME				1 4 CITY 2 1 THE 22 NAM 23 STRE 24 CITY 3.1 THE 32 NAM	E E ET ADDRESS - ST - ZIP E				
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THEF NAME SPREEL ADDRESS COVE-STE-749 THEF NAME STREEL ADDRESS CHY-ST-749 THEE			DELETE	1 4 CITY 2 1 TITL 22 NAM 23 STRE 24 CITY 3.1 TITL 32 NAM 33 STR 34 CITY	E E ADDRESS - ST-ZIP E E E EET ADDRESS - ST-ZIP E	700001		Change	☐ Addition
THEF NAME STREET ADDRESS CHY-ST-74P THEF NAME STREET ADDRESS CHY-ST-74P THEE NAME	MIAMI FL		DELETE	1 4 City 2 1 Tift 2 2 NAM 2 3 STRE 2 4 City 3.1 Tift 3 2 NAM 3 3 STR 3 4 City 4 1 Tift 4 2 NAM	E E ADDRESS - ST-ZIP E E E EET ADDRESS - ST-ZIP E	700001 ⁻ -03/15/96(Change	☐ Addition
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certify that the information indic oath; that I am an officer or sta appears in Block 12 or Block 1 al report is true and accurate and that my signature shall have the same legal effect as if made under Empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE: