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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

| DOCUMENT # 1. Corporation Name | H |
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| 1. Corporation real | |

WANER AVIATION, INCORPORATED

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| WEST PALA | of Business CH International Airport M Beach Fl 33406 | Mailing Address P. O. BOX 18229 WEST PALM BEACH | FL 33416 | | | | | | |
|--|--|---|--------------------|---------------|--------------------|--|-------------------------------|---------------------------|-------------------------------|
| US | | U\$ | | | | 3. Date Incorporated or Qualified 09/30/1985 | 3a, Date | 6/26/1 | 995 |
| 2. Principal Pla | ace of Business | 2a. Mailing Address 26 | | | | 4. Fet Number 65-0101080 | · | <u> </u> | Applied For Not Applicable |
| Suite, Apt. # | #, etc. | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | | | Additional Required |
| City & State | 3 | City & State | | | | Election Campaign Financing Trust Fund Contribution | | | 0 May Be d to Fees |
| Zip 24 | Country 25 | Zip 29 | 30 Cou | intry | | This corporation has liability for in Florida Statutes | | under s | 199.032, |
| | 9. Name and Address of Curren | t Registered Agent | | | | 10. Name and Address of New R | egistered A | gent | |
| PALM | no, guy Beach international airpoi Belvedere RD | श | | | Name Street Add | iress (P.O. Box Number is Not Acceptab | le) | | |
| | PALM BEACH FL 33406 | | : | | City | | FL | 85 Z | p Code |
| or register familiar wit SIGNATURE | to the provisions of Sections 607.0502 ed agent, or both, in the State of Floric th, and accept the obligations of, Sections of Sections o | da, Such change was authoriz on 607.0505, Florida Statutes | zed by the c s. | corpo | ation s Do | oration submits this statement for the pur and of directors, I hereby accept the appr ec when renstains? | pose of char pintment as i | nging its i registered | agent. ram |
| | OFFICERS AN | | 13. | , regionities | 39.41.310.1040 | ADDITIONS/CHANGES TO OFF | | DIRECTO | DRS IN 12 |
| 12. | S | DELETE | 1, 1 7 | TILF | T | | | Change | Addition |
| | TIRANNO, GUY | | 1.2 N/ | | | | | | |
| NAME | 6 BARRY LANE | | | | DDRESS | | | | ŀ |
| STREET ADDRESS | SMITHTOWN NY | | | HTY-ST- | | | | | DRS IN 12 Addition |
| CITY-ST-ZIP | VD | DELETE | 2 1 1 | | - 215 | | т |] Change | Addition |
| TITLE | WANER, DOROTHY | | 2 2 N | | | | _ | - | |
| NAME OVER ADDRESS | 1104 RHAPSODY WAY | | | | DDRESS | | | | |
| STREET ADDRESS | ROYAL PALM BEAHC FL | | | ITY-ST | | | | | Į |
| CITY-ST-ZIP | CEO | DELETE | 3.17 | | -11 | | | Change | ☐ Addition |
| NAME | WANER, DAVID | ·- | 3.2 N | | İ | | _ | | |
| STREET ADDRESS | 1104 RHAPSODY WAY | | | | ADDRESS | | | | |
| CITY-ST-ZIP | ROYAL PALM BEAHC FL | | | ITY-ST | | | | | |
| TITLE | | DELETE | 4.11 | | | | Ē |] Change | Addition |
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| STREET ADDRESS | | | 435 | TREET A | DDRESS | | | | } |
| CITY - SI - ZIP | | | 44C | ITY-ST | - ZIP | | | | |
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| | | | | OTY-ST | | | | | Į |
| CITY-S1-ZIP | att the left westign a malind | with this files in and enterth, for | | | | for the exemption stated in Section 119 | 07/31/k) Flo | rida Stati | ites I further |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 chapted, or on an effective ment with an address.

SIGNATURE:

ING OFFICER OR DIRECTOR

04-18-94 Date

407-478-5010