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 # J07781 1. Corporation Name AVIATION BOULEVARD COMMERC Principal Place of Business % WILLIAM W. CALDWELL 756 BEACHLAND BLVD VERO BEACH FL 32963 US 2. Principal Place of Business		Mailing Address Mailing Address MULLIAM W. CALDWI P.O. BOX 3686 VERO BEACH FL 32964 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/04/1986 4. FEI Number Applied for	
21		26		59-2708174	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & Sta	te .	City & State		6 Floring Councies Financies	Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation to the control of the control o	
24	25	29	30	Personal Property Tax due June 30.	X Yes ☐ No
	 Name and Address of Curr Name and Address of Curr 	ent Registered Agent	81 Name	10. Name and Address of New Registere	d Agent
11. Pursuant office or agent. I a SIGNATURE	am familiar with, and accept the obl	igations of, Section 607.0505, F	lorida Statutes.	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	
40	Signature, typed or printed name of registered to		OTE Registered Agent signature req		UB DIDECTORS IN 40
12.	VPS	ND DIRECTORS DELETE	13. 13 HFLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	SORENSEN, J. DALE		1.2 NAME		
STREET ADDRESS	634 BEAHCLAND BLVD.		1.3 STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH FL 32963		1,4 City-S1-ZIP		
TITLE	AS	☐ DELETE	2.1 TITLE		Change Addition
NAME	CALDWELL, WILLIAM W.		2.2 NAME		
STREET ADDRESS	756 BEACHLAND BLVD.		2 3 STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH FL 32963		2. 4 CITY - ST - ZIP	·	
TITLE	BRADOUANI OUADICO I	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	BRADSHAW, CHARLES J. 500 AZALEA LANE		3.2 NAME		
STREET ADDRESS	VERO BEACH FL 32963		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	4FUA PENALLI F ASSOCI	DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition
NAME		veret	4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE	<u> </u>	DELETE	5.1 YHLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY_ST_7IP			6.4 PITY - ST - 7/P		

14. 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 annual report or supplemental annual report in 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 of the accurate with an address.

(A) / borne

1/22/90

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FILED

Apr 06 1998 8:00am

Secretary of State