FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

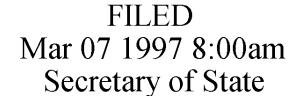
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J34054

(3)

AIR ONE OF PINELLAS, INC.



		.,,				
Principal Place of Business Mailing Address 12305 62ND ST N 12305 62ND ST NO D				1,020,000,000,000,000,000,000,000,000,00		
LARGO FL 34843 US		LARGO FL 33773-3716 US		;		
				3. Date Incorporated or Qualified 09/19/1986	3a. Date of Last R 04/26/1996	leport
2. Principal P	lace of Business	2a. Mailing Address	~ 2, ,,,	4. FEI Number		pplied For
21 1430	1-60 treet N.		Street N.	59-2714570		ot Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.		6. Certificate of Status Desired		Additional equired
City & State	و سنر و	City & State	Florida		Added	May Be to Fees
Zip	Country	Zip	Country	8. This corporation has liability for		i. 199.032,
24 3460	20 25 USA		30 US	.	Yes No	
	9. Name and Address of Curre	nt Hegistered Agent	81 Name	10. Name and Address of New Re	Sgistered Agent	
	EUCE, ROBERT A.		of Name			
1458 PREMIER VILLAGE WAY CLEARWATER FL 34624			82 Street Add	tress (P.O. Box Number is Not Accepta	ble)	
CLEA	MYMIEN FL 34024		83			
}						
i			84 City		FL 85 Zip	Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508. Florida Statute	s, the above-named cor	poration submits this statement for the		its registered
office or r	egistered agent, or both, in the Stati	e of Florida. Such change was a	uthorized by the corpora	rporation submits this statement for the ation's board of directors. I hereby acce	pt the appointment as	registered
	an tampata and accept the only	3410/15/01, 363 JOH 007 5005, 1101	KIA SIAIUIOS.	71	mars 1	9 Z
SIGNATURE	Minature Typical or printed name of registered at	ions and trie Lapplicable INDTE	Registered Agent signature requ	uired when reinstating)	DATE	
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTOR	
TITLE	DP .	DELETE	1.1 TITLE		☐ Change	Addition
NAME	DEFELICE, ROBERT A.		1.2 NAME			
STREET ADDRESS	1458 PREMIER VILLAGE WAY		1.3 STREET ADDRESS			
COY+ST-ZIF	CLEARWATER FL		1.4 CITY - ST - ZIP			
THE		☐ DELETE	2.1 TITLE		L Change	Addition
NAME			2.2 NAME			
STREET ACIDRESS		.*	2.3 STREET ADDRESS			
C(1Y - ST - 73P			2 4 CITY-ST-ZIP			1 1 4 4 4 4 4 4 4
THILE		☐ DELETE	31 TITLE		Change	Addition
NAME			3.2 NAME			
STREET ACORESS			3 3 STREET ADDRESS			
CHTY - ST - ZIP	.,	DELETE.	3.4. CITY-ST-ZIP		Change	Addition
T(T.F		☐ DELETE	41 TITLE	•	L. Change	L] ADDIBOU
NAME			4 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY - \$1 - 7/P		Deriere	4.4 CITY-ST-ZIP		Channa	Addition
TITLE		☐ DELETE	5.1 TITLE		L. Change	L Addition
NAME			5.2 NAME			•
STREET ADDRESS			5.3 STREET ADDRESS			
C-TY - S1 - ZIP	2) NAS AND	T DECETE	5.4 CITY-ST-ZIP		Change	Addition
TITLE		☐ DELETE	6.1 TITLE		F Change	L. Manifoli
NAME			6.2 NAME			

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. Lo 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 inclicated 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 trospe empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or on an attachment with an address.