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FILED
Feb 26 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J48750
1. Corporation Name
SHELTAIR AVIATION CENTER, INC.

(0)

Principal Place of Business
1100 LEE WAGENER BLVD
P.O. BOX 22887
FT LAUDERDALE FL 33315-0566

Mailing Address
1100 LEE WAGENER BLVD
P.O. BOX 22887
FT LAUDERDALE FL 33315-0566

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/23/1986

4. FEI Number

65-0000245

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HOLLAND, GERALD M.
4860 NE 12 AVENUE
FT LAUDERDALE FL 33334

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

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

Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

P

☐ DELETE

NAME

HOLLAND, GERALD M.

STREET ADDRESS

4860 NE 12 AVENUE

CITY-ST-ZIP

FT LAUDERDALE FL

TITLE

V

☐ DELETE

NAME

HAHNER, RICHARD A.

STREET ADDRESS

4860 NE 12 AVENUE

CITY-ST-ZIP

FT LAUDERDALE FL

TITLE

S

☐ DELETE

NAME

CASORIA, PETER JR.

STREET ADDRESS

4860 NE 12 AVENUE

CITY-ST-ZIP

FT LAUDERDALE FL

TITLE

VT

☐ DELETE

NAME

SCHMATZ, JOHN

STREET ADDRESS

4860 NE 12 AVENUE

CITY-ST-ZIP

FT LAUDERDALE FL

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 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 registered agent 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.

SIGNATURE:

JOHN SCHMATZ

1/28/98

954-771-2210

CR2E034 (10/97)