

FILED
Mar 06, 1999 8:00 am
Secretary of State

03-06-1999 90087 043 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS																									
DOCUMENT # J90528 1. Corporation Name GAONA CHARTERS, INC.																											
Principal Place of Business VENICE FL 34382		Mailing Address VENICE FL 34382																									
432 SPADARO DR VENICE FL 34385		DO NOT WRITE IN THIS SPACE																									
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		3. Date Incorporated or Qualified 09/02/1987 4. FEI Number 65-0005745 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 the current year intangible Personal Property Tax. ☐ Yes ☒ No																									
9. Name and Address of Current Registered Agent GAONA, MARCO A. VENICE FL 34385		10. Name and Address of New Registered Agent 81 Name MARCO GAONA 82 Street Address (P.O. Box Number is Not Acceptable) 432 SPADARO DR 83 City VENICE FL 84 Zip Code 34385																									
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 607.0506, Florida Statutes.																											
SIGNATURE <i>Marco Gaona</i> DATE																											
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12																									
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Marco Gaona*

2-22-99 941-488-2311

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2034 (1/188)