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Jan 14 1997 8:00am

Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K01543 (3)

1. Corporation Name  
FORT LAUDERDALE JET CENTER, INC.

Principal Place of Business  
1100 LEE WAGNER BLVD.  
FORT LAUDERDALE FL 33315

Mailing Address  
1100 LEE WAGNER BLVD.  
FORT LAUDERDALE FL 33315-3570



3. Date Incorporated or Qualified 11/12/1987  
3a. Date of Last Report 02/06/1996

2. Principal Place of Business 21  
2a. Mailing Address 26  
Suite, Apt. #, etc. Suite, Apt. #, etc.

22. City & State 27  
23. Zip 24 25. Country 28 29. City & State 30

4. FEI Number 65-0031710  
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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent

HOLLAND, GERALD M.  
4860 N.E. 12TH 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 the if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PD NAME HOLLAND, GERALD STREET ADDRESS 4860 N.E. 12TH AVENUE CITY-ST-ZIP FT. LAUDERDALE FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP
TITLE VD NAME HAHNER, RICHARD STREET ADDRESS 4860 N.E. 12TH AVENUE CITY-ST-ZIP FT. LAUDERDALE FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
TITLE SD NAME CASORIA, PETER JR. STREET ADDRESS 4860 N.E. 12TH AVENUE CITY-ST-ZIP FT. LAUDERDALE FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
TITLE T NAME SCHMATZ, JOHN STREET ADDRESS 4860 N.E. 12TH AVENUE CITY-ST-ZIP FT. LAUDERDALE FL	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I do 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 included 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.

SIGNATURE:  JOHN SCHMATZ 1/2/97 954-359-3229  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)