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Apr 07 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # K10355

(1)

1. Corporation Name

A.L. AIRCRAFT #5 CORP.

Principal Place of Business

950 S.E. 12TH ST.
HIALEAH FL 33010

Mailing Address

950 S.E. 12TH ST.
HIALEAH FL 33010-5831

3. Date Incorporated or Qualified

01/04/1988

3a. Date of Last Report

04/19/1996

4. FEI Number

65-0115217

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

2. Principal Place of Business

21

Suite, Apt. #, etc

22 City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

FINAZZO, NICOLAS
950 SE 12TH STREET
HIALEAH FL 33010

10. Name and Address of New Registered Agent

81 Name

MICHAEL R. HENRICKSON

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

950 S.E. 12 STREET

83

84 City

HIALEAH

FL

85

Zip Code
33010

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

Michael R. Henrickson

MICHAEL R. HENRICKSON / ASST. SEC. 3-27-97

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DPC	<input type="checkbox"/> DELETE
NAME	BACHELOR, GEORGE E.	
STREET ADDRESS	950 S.E. 12TH ST.	
CITY - ST - ZIP	HIALEAH FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	HIGGINS, JOHN	
STREET ADDRESS	950 SE 12TH STREET	
CITY - ST - ZIP	HIALEAH FL	
TITLE	DS	<input checked="" type="checkbox"/> DELETE
NAME	BACHELOR, ANNE O	
STREET ADDRESS	950 SE 12TH STREET	
CITY - ST - ZIP	HIALEAH FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	MESECHER, BOYD	
STREET ADDRESS	950 SE 12TH STREET	
CITY - ST - ZIP	HIALEAH FL	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	DAWSON, HUMPHREY	
STREET ADDRESS	950 SE 12TH ST.	
CITY - ST - ZIP	HIALEAH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BACHELOR, MARIANNE T	
STREET ADDRESS	950 SE 12TH ST	
CITY - ST - ZIP	HIALEAH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	SEE ATTACHED LIST
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	D/S
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 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, with an address: MICHAEL R. HENRICKSON

SIGNATURE:

Michael R. Henrickson

ASST. SECRETARY 3-27-97

(305) 889-6224

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)

OFFICERS & DIRECTORS

COMPANY: A.L. AIRCRAFT #5 CORP.

<u>Title</u>	<u>Name</u>	<u>Address</u>
P/D/C	Batchelor, George E.	950 S.E. 12th Street Hialeah, FL 33010
D/S	Batchelor, Marianne T.	950 S.E. 12th Street Hialeah, FL 33010
D	Ferraresi, Daniel J.	950 S.E. 12th Street Hialeah, FL 33010
V	Walker, Raymond S.	950 S.E. 12th Street Hialeah, FL 33010
V	Mesecher, Boyd D.	950 S.E. 12th Street Hialeah, FL 33010
T	Higgins, John J.	950 S.E. 12th Street Hialeah, FL 33010
AS	Henrickson, Michael R.	950 S.E. 12th Street Hialeah, FL 33010
AS	Dawson, Humphrey	950 S.E. 12th Street Hialeah, FL 33010