

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Jul 08, 1999 8:00 am
Secretary of State

07-08-1999 90007 049 ***158.75

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **K72855** ✓

1. Corporation Name

HUB AIR, INC.

Principal Place of Business

6191 ORANGE DRIVE
#6153B
DAVIE FL 33314
US

Mailing Address

PO BOX 8455
PEMBROKE PINES FL 33084
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/15/1989

4. FEI Number

59-2940326

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 the current year
Intangible Personal Property.



Yes



No

2. Principal Place of Business

21 590 Sawgrass Corporate

Suite, Apt. #, etc.

22 Parkway

City & State

23 Sunrise, Florida 33325

Zip

Country

2a. Mailing Address

26 590 Sawgrass Corporate

Suite, Apt. #, etc.

27 Parkway

City & State

28 Sunrise, Florida 33325

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

SHERADSKY, RODD
11073 TOPEKA PL
COOPER CITY FL 33026

10. Name and Address of New Registered Agent

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

TITLE **PST** ☐ DELETE

NAME **SHERADSKY, RODD L.**

STREET ADDRESS **11073 TOPEKA PL**

CITY-ST-ZIP **COOPER CITY FL**

TITLE **V** ☐ DELETE

NAME **BONNELL, RUSSELL L.**

STREET ADDRESS **1550 S.W. 139TH AVENUE**

CITY-ST-ZIP **DAVIE FL**

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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 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:

Russell L. Bonnell

7/1/99

954-846-7700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/99)



K72855
583013-90007-49



July 1, 1999

Florida Department of State
Annual Reports Filings
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Hub-Air Inc.
Document # K72855

To Whom It May Concern:

Enclosed please find our check # 10645 in the amount of \$158.75. We apologize for filing the report late, but we just received your 2nd notice. Today I called your office and I spoke with Robin Easom. I explained to her that we moved on June 1998. The report still shows the old address, this is why the first notice was never received. Please waive the penalties.

Please update your records with our new address:

HUBAIR INC.
590 Sawgrass Corporate Parkway
Sunrise, Florida 33325

Thank you for your cooperation and understanding.

Sincerely,

Ofelia Marulanda
Staff Accountant