PROFIT CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 JUL -5 AM 8:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M16556 (6)

1. Corporation Name

BLACK LION AVIATION CORP.

Principal Place of Business	Mailing Address
1 SE 3RD AVENUE SUITE #970 MIAMI FL 33131	1 SE 3RD AVENUE SUITE #970 MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	06/11/1985	3a. Date of Last Report	04/22/1994
4. FEI Number	59-2548711	Applied For	Not Applicable

2. Principal Place of Business: 21 ___ Suite, Apt. #, etc: 22 ___ City & State: 23 ___ Zip: 24 ___ Country: 25 ___

2a. Mailing Address: 26 1 S.E. 3rd Ave., Suite, Apt. #, etc: 27 Suite 1250 City & State: 28 Miami, Florida Zip: 29 33131 Country: 30 U.S.A.

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. ☐ $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

FEOLA, THOMAS P.
1 SE 3RD AVENUE
SUITE 970
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name: THOMAS P. FEOLA
82 Street Address (P.O. Box Number is Not Acceptable): 1 S. E. 3rd AVENUE, ~~Suite 1250~~
83
84 City: MIAMI FL 85 Zip Code: 33131

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: N/A

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	DUNN, FRED L.
STREET ADDRESS	6215 S.W. 146TH COURT
CITY, ST, ZIP	MIAMI FL
TITLE	~~D~~
NAME	~~BROOKS, GRAEME F.~~
STREET ADDRESS	~~6215 S.W. 146TH COURT~~
CITY, ST, ZIP	~~MIAMI FL~~
TITLE	VT
NAME	Dunn, Philip J.
STREET ADDRESS	3525 Estepona Avenue
CITY, ST, ZIP	Miami, FL 33178
TITLE	VS
NAME	Dunn, Gregory T.
STREET ADDRESS	3525 Estepona Avenue
CITY, ST, ZIP	Miami, FL 33178

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

1 TITLE / 1 NAME / 1 STREET ADDRESS / 1 CITY, ST, ZIP		☐ Change ☐ Addition
2 TITLE / 2 NAME / 2 STREET ADDRESS / 2 CITY, ST, ZIP		☐ Change ☐ Addition
3 TITLE / 3 NAME / 3 STREET ADDRESS / 3 CITY, ST, ZIP		☐ Change ☐ Addition
4 TITLE / 4 NAME / 4 STREET ADDRESS / 4 CITY, ST, ZIP		☐ Change ☐ Addition
5 TITLE / 5 NAME / 5 STREET ADDRESS / 5 CITY, ST, ZIP		☐ Change ☐ Addition
6 TITLE / 6 NAME / 6 STREET ADDRESS / 6 CITY, ST, ZIP		☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: [signature] 6/28/95 (305) 592-7060

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE #

CR2E034 (3/95)

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