

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M61279

1. Entity Name

AUTAIR FREIGHT SERVICES, INC.

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90030 002 ***150.00

Principal Place of Business

Mailing Address

7301 NW 34TH ST
MIAMI FL 33122

7301 NW 34TH ST
MIAMI FL 33122-1248

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0009168

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LOWENSTEIN, ELLIOT
2100 SALZEDO ST
STE 303
CORAL GABLES, 33134

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME JACKSON, PETER
STREET ADDRESS PERCIVAL WAY
CITY-ST-ZIP LUTON, BEDFORDSHIRE

TITLE S ☐ Change ☒ Addition
NAME WHITAKER PAUL S
STREET ADDRESS 7301 NW 34TH STREET
CITY-ST-ZIP MIAMI FL 33122

TITLE D ☐ Delete
NAME WILSON, STEPHEN GARY
STREET ADDRESS 25 ELIZABETH AVE.
CITY-ST-ZIP SURREY, ENGLAND

TITLE V ☐ Change ☒ Addition
NAME N. MONTENEGRO
STREET ADDRESS 7301 NW 34TH STREET
CITY-ST-ZIP MIAMI FL 33122

TITLE SRVP ☐ Delete
NAME CARRILLO, TERESA
STREET ADDRESS 7301 NW 34 STREET
CITY-ST-ZIP MIAMI FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☒ Delete
NAME MCKINNON, L P
STREET ADDRESS 7301 NW 34 ST
CITY-ST-ZIP MIAMI FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIG. PAUL S. WHITAKER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

305 594 4949

CR2E034 (9/99)