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CORPORATION
ANNUAL REPORT
1995



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

FILED
STATE
DIVISION OF CORPORATIONS

95 FEB -6 PM 4:49

DOCUMENT # M78350 (9)

1. Corporation Name

SHELTAIR FORT LAUDERDALE INTERNATIONAL, INC.

Principal Place of Business

1100 LEE WAGNER BLVD.
FT. LAUDERDALE FL 33315

Mailing Address

1100 LEE WAGNER BLVD.
FT. LAUDERDALE FL 33315

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/28/1988

3a. Date of Last Report

01/21/1994

4. FEI Number

65-0056344

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

HOLLAND, GERALD M.
4860 NE 12 AVENUE
FT. LAUDERDALE FL 33334

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	HOLLAND, GERALD M.
STREET ADDRESS	4860 N.E. 12TH AVE
CITY-ST-ZIP	FT. LAUDERDALE FL
TITLE	VD
NAME	HAHNER, RICHARD A.
STREET ADDRESS	4860 NE 12 AVENUE
CITY-ST-ZIP	FT LAUDERDALE FL
TITLE	SD
NAME	CASORIA, PETER JR.
STREET ADDRESS	4860 NE 12 AVENUE
CITY-ST-ZIP	FT LAUDERDALE FL
TITLE	T
NAME	SCHMATZ, JOHN
STREET ADDRESS	4860 NE 12 AVENUE
CITY-ST-ZIP	FT LAUDERDALE FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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: JOHN SCHMATZ *John Schmatz* 1/31/95 305-3593200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR