## · FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Namo M98525 (2)

**ESQUIRE AVIATION, INC.** 

## Feb 27 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						i i i i i i i i i i i i i i i i i i i	
	YNE BLVD SUITE #1970	% STEVEN I. PERETZ 201 S. BISCAYNE BLVD., SUITE #1970			)	DO NOT WRITE IN THIS SPACE	
MIAMI FL 33131		MIAMI FL 33131				3, Date Incorporated or Qualified	
a Original D	and of Dunings	2a. Mailing Address				09/13/1988 4. FEI Number Applied For	
2. Principal Place of Business		28. Mailing Address				NOT APPLICABLE Not Applicable	
Suite, Apt #, etc		Suite, Apt. #, etc.				SS 75 Additional	
22		27				5. Certificate of Status Desired Fee Required	
City & State		City & State				Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution Added to Fees	
Ζiρ	Country	Zip	Cou	untry		8. This corporation owes or has paid the current year Intangable	
24	25	29	30	<del>,</del>		Personal Property Tax due June 30. Yes No	
	g. Name and Address of Cur	rent Registered Agent				10. Name and Address of New Registered Agent	
PEI	retz, steven I.			81	Name		
% KLUGER, PERETZ & KAPLAN, P.A.				82	Street Ac	ddress (P.O. Box Number is Not Acceptable)	
SU	ITE 1970-MIAMI CENTER, 100	CHOPIN PLAZA		83			
MLA	MI FL 33131			63	l		
				84	City	FL 85 Zip Code	
				Ш		corporation submits this statement for the purpose of changing its registere	
agent. I a SIGNATURE	m familiar with, and accept the of					oration's board of directors. I hereby accept the appointment as registered	
12.		AND DIFFECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPS	DELFTE	1.1 1	ITLE		Change Addition	
NAME	PERETZ, STEVEN I.		1.2 N	IAME	1		
STREET ADDRESS	100 CHOPIN PLAZA, #197	<b>'</b> 0	1.3 9	TREET	ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 0	HTY-S	T - ZiP		
TITLE	DVT	☐ DELETE	211	ITLE		Change Addition	
NAME	BERKOWITZ, JAY		221	IAME			
STREET ADDRESS	9875 NW 79TH AVE		2.3 8	TREET	ADDRESS		
CITY-ST-ZIP	HIALEAH GDNS FL			2. 4 CITY - ST - ZIP			
TITLE		☐ DELETE	3.1 7			Change Addition	
NAME			3.2 N				
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP		DELETE	3.4 t 4.1 T		ST-ZIP	Change Addition	
TITLE		☐ Officit					
NAME				NAME	4000000		
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP		DELETE	5.11	RTY - S	1-282	☐ Change ☐ Addition	
		_ pittit	5.21				
NAME STREET ADDRESS					ADDRESS		
				ITY-S			
CITY-ST-ZIP TITLE		DELETE	6.1.1		9-21	Change Addition	
NAME				IAME		_ · · ·	
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP					ST-ZIP		
UIT-SI-ZIP	14 h 1 h 1 h 1 h 1 h 1 h 1 h 1 h 1 h 1 h	duith this time does not such				t in Section 119 07/3V/i) Florida Statutes I further certify that the information	

indicated on this annual report or suppliemental 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 opporation 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 charged, or on an attachment with an address.