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Jan 17 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N23046 (8)

1. Corporation Name

AIRLINE VETERANS ASSOCIATION INC.

Principal Place of Business

29 SAN SEBASTIAN
CORAL GABLES FL 33134
US

Mailing Address

29 SAN SEBASTIAN
CORAL GABLES FL 33134-6818
US3. Date Incorporated or Qualified
10/16/19873a. Date of Last Report
11/13/1996

2. Principal Place of Business

21 29 SAN SEBASTIAN

2a. Mailing Address

26 Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 CORAL GABLES FL

Zip Country

24 33134 25 USA

City & State

28 City & State

Zip Country

29 Zip Country

30

4. FEI Number
NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

NESPRA, JOSE F
29 SAN SEBASTIAN
CORAL GABLES FL 33134

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 617.0502 and 617.1508, 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 617.0503, 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 PD ☒ DELETENAME ROSADO, DULCE M.
STREET ADDRESS 2427 SW 102 COURT
CITY-ST-ZIP MIAMI FLTITLE VPD ☒ DELETENAME BLAKENSHIP, BLANCA
STREET ADDRESS 1980 NW 36 AVE
CITY-ST-ZIP MIAMI FLTITLE S ☒ DELETENAME ROSADO, LUCRE
STREET ADDRESS 2427 SW 102 COURT
CITY-ST-ZIP MIAMI FLTITLE T ☐ DELETENAME NESPRAL, JOSE F.
STREET ADDRESS 333 NW 31 AVE
CITY-ST-ZIP MIAMI FLTITLE VTD ☐ DELETENAME GUERRERO, JR. F
STREET ADDRESS 1409 BIARRITZ DR
CITY-ST-ZIP MIAMI BEACH FLTITLE VTD ☐ DELETENAME GOMEZ, CONCHITA
STREET ADDRESS 2496 SW 17TH AVE #5313
CITY-ST-ZIP MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition1.2 NAME CONCHITA GOMEZ
1.3 STREET ADDRESS 2496 SW 17 AVE #5313
1.4 CITY-ST-ZIP MIAMI FL2.1 TITLE VPD ☒ Change ☐ Addition2.2 NAME JOSE HORACIO BAILEZ
2.3 STREET ADDRESS 660 NE 93 ST
2.4 CITY-ST-ZIP MIAMI SHORES FL3.1 TITLE S ☒ Change ☐ Addition3.2 NAME EMILIA JONASAS
3.3 STREET ADDRESS 1528 WESWARD DR
3.4 CITY-ST-ZIP MIAMI SPRING FL4.1 TITLE T ☐ Change ☐ Addition4.2 NAME JOSE F. NESPRAL
4.3 STREET ADDRESS 29 SAN SEBASTIAN
4.4 CITY-ST-ZIP CORAL GABLES FL5.1 TITLE VTD ☒ Change ☐ Addition5.2 NAME DULCE M. LACAL
5.3 STREET ADDRESS 7890 SW 18 TERR
5.4 CITY-ST-ZIP MIAMI FL6.1 TITLE VTD ☒ Change ☐ Addition6.2 NAME DAMASO MENESES
6.3 STREET ADDRESS 13325 SW 116 CT
6.4 CITY-ST-ZIP MIAMI FL

14. I do 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSE F. NESPRAL JAN 5, 1997 305 46196X9

Date

Daytime Phone # 0027205

CR2E037 (9/96)