

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000105634

1. Entity Name

AIRTAXI INDUSTRIES, INC.

Principal Place of Business

3404 SOUTH BEACH DRIVE
TAMPA FL 33629

Mailing Address

3404 SOUTH BEACH DRIVE
TAMPA FL 33629

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

☒ 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

~~SPIEGEL & UTRERA, P.A.~~
~~343 ALMERIA AVENUE~~
~~CORAL GABLES FL 33134~~

COSENTINO, CORNELIUS

Name

CORNELIUS COSENTINO

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

708 S.

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 CORNELIUS COSENTINO Cornelius Cosentino 23 APRIL 2001

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, 2001 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 ☐ Delete
NAME PD
STREET ADDRESS LEFTWICH, DALTON L
CITY-ST-ZIP ~~3404 SOUTH BEACH DRIVE~~
~~TAMPA FL 33629~~

6104 TREMONT ST

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP DALLAS TX 75214-4556

TITLE ☐ Delete
NAME SD
STREET ADDRESS COSENTINO, CORNELIUS
CITY-ST-ZIP ~~3404 SOUTH BEACH DRIVE~~
~~TAMPA FL 33629~~

708 S. DAVIS

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP BLVD TAMPA FL 33606-3914

TITLE ☐ Delete
NAME TD
STREET ADDRESS CAPE, FRANCIS E
CITY-ST-ZIP ~~3404 SOUTH BEACH DRIVE~~
~~TAMPA FL 33629~~

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

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: Cornelius Cosentino April 23, 2001 813-251-4669

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

0353673

FILED
Apr 28, 2001 8:00 am
Secretary of State

04-28-2001 90025 042 ***150.00



DO NOT WRITE IN THIS SPACE