## 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 #

(6)

APA INTERNATIONAL AIR, S.A.

## FILED Jan 23 1998 8:00am Secretary of State



Principal Place of Business Mailing Address P.O. BOX 524039 P.O. BOX 524039 MIAMI FL 33152 MIAMI FL 33152 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/12/1984 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 58-1425352 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible 25 30 Personal Property Tax due June 30. Yes 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RODRIGUEZ, JORGE L 657 SOUTH DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) MAIMI SPRINGS FL 33166 83 84 City 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 reinstating) (10/97)OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change Addition DELETE 1.1 TITLE TITLE LOVATON, RAFAEL T CR2E034 NAME 1.2 NAME 444 DAROCO STREET ADDRESS 1.3 STREET ADDRESS **CORAL GABLES FL 33166** CITY-ST-7IP 1.4 CITY-ST-7IP Change TITLE VD **X** DELETE 2.1 TITLE Addition QUIRICO, TULIO NAME 2.2 NAME AVE. TIRADENTES, PLAZA MERENGUE, 2DO. PISO Jose Luis Gonzalez Gallarreta STREET ADDRESS 23 STHEET ADDRESS SANTO DOMINGO, DOMINICAN REP 9032 S.W. 78PL., MIAMI, FL. 33156 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE RODRIGUEZ, JORGE L NAME 3.2 NAME 1440 SW 102 PLACE STREET ADDRESS 3.3 STREET ADDRESS **MIAMI FL 33174** 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4 3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. Thereby 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 angular open or supplemental angular report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or this true amplify an address.

1. Thereby certify that the Information section 19.07(3)(i), Florida Statutes. I further certify that the information indicated on this angular open or supplemental angular report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver of the corporation of the corporation or the receiver of the corporation of the corporatio