

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 21, 2002 8:00 am
Secretary of State

05-21-2002 90888 029 ***150.00

DOCUMENT # P01000099751

1. Entity Name

AVALON AVIATION & MACHINE, INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4631 NW 31ST AVENUE

Suite, Apt. #, etc.

STE 183

City & State

FT. LAUDERDALE, FL

Zip

33309

Country

USA

3. Mailing Address

4631 NW 31ST AVENUE

Suite, Apt. #, etc.

STE 183

City & State

FT. LAUDERDALE, FL

Zip

33309

Country

USA

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4. FEI Number

65-1146781

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

KENNETH PIRES

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

1830 NW 32ND ST

City

FT. LAUDERDALE

FL

Zip Code

33309

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

Kenneth Pires

4/30/02

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.
(See criteria on back)

☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
PTD
KENNETH PIRES
1830 NW 32ND ST
FT. LAUDERDALE, FL 33309

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
VSO
DAVID NOTBERG
1830 NW 32ND ST
FT. LAUDERDALE, FL 33309

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Kenneth Pires

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone: #

CR2E034B (12/01)