

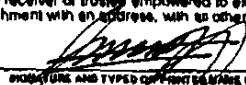
TO :
FROM :

PHONE NO. : 3058194373

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91438 005 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000014860			
1. Entity Name AVIA SALES CORP.			
Principal Place of Business 1301 N.W. 89TH COURT #212 MIAMI, FL 33172		Mailing Address 1301 N.W. 89TH COURT #212 MIAMI, FL 33172	
2. Principal Place of Business 2193 W. 73 street		3. Mailing Address 2193 W. 73 st.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Hialeah		City & State Hialeah, FL	
Zip 33016		Zip 33016	
County Dade		County Dade	
4. Name and Address of Current Registered Agent NOUAISSER, JEAN-MARC 1301 N.W. 89TH COURT #212 MIAMI, FL 33172		5. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
6. 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. I am familiar with, and accept the obligations of registered agent.		7. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
SIGNATURE 		DATE	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
D NOUAISSER, JEAN-MARC 1301 N.W. 89TH COURT #212 MIAMI, FL 33172			
☐ Delete		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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☐ Delete		☐ Change ☐ Addition	
12. 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 10 or Block 11 if changed, or on an attachment with an address, with as other like empowered.			
SIGNATURE:  Jean Marc Nouaissier		4/30/03 (305) 513-3970	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	