

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2003 8:00 am
Secretary of State

02-28-2003 90424 001 ***300.00

DOCUMENT # P02000073294

1. Entity Name
KEY LANDING GEAR, INC.



Principal Place of Business
6929 N W 46TH STREET
MIAMI FL 33166

Mailing Address
6929 N W 46TH STREET
MIAMI FL 33166

2. Principal Place of Business

3. Mailing Address

1100 W 35 ST. # 29

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

MIAMI

4. FEI Number

30-0101383

Applied For

Not Applicable

Zip

Country

Zip

33012

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

ANGENE, NED N
6929 N W 46TH STREET
MIAMI FL 33166

DELETE

7. Name and Address of New Registered Agent

Name RAFAEL DE ONATE

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

1100 W 35 ST. # 29

City MIAMI

FL

Zip Code 33012

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME ANGENE, N
STREET ADDRESS 6929 N W 46TH STREET
CITY-ST-ZIP MIAMI FL 33166 ☒ Delete

TITLE D
NAME GEOFFREY, H
STREET ADDRESS 6929 N W 46TH STREET
CITY-ST-ZIP MIAMI FL 33166 ☒ Delete

TITLE D
NAME GHEORGHE, E
STREET ADDRESS 6929 N W 46TH STREET
CITY-ST-ZIP MIAMI FL 33166 ☐ Delete

TITLE D
NAME WASHOFKY, M
STREET ADDRESS 6929 N W 46TH STREET
CITY-ST-ZIP MIAMI FL 33166 ☒ Delete

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME DIRECTOR
STREET ADDRESS RAFAEL DE ONATE
CITY-ST-ZIP 1100 W 35 ST MIAMI, FL 33012

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)