## 2004 FOR PROFIT CORPORATION REINSTATEMENT

## FILED **DOCUMENT # P02000092073** 1. Entity Name FLORIDA PROFESSIONAL AVIATION, INC. 04 NOV 29 PM 4: 26 SECRETARY UPSTATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 5455 N. FEDERAL HIGHWAY 5455 N. FEDERAL HIGHWAY SUITE O SUITE 0 BOCA RATON, FL 33487 BOCA RATON, FL 33487 2. Principal Place of Business 3. Mailing Address 7090 Ayrshine Suite, Apt. #, etc. 4. FEI Number City & State City & State Applied For Boca Raton Boca Raton, FL 03-0489223 Not Applicable Country Country \$8.75 Additional Zip 5. Certificate of Status Desired USD USA 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name marbach RIDOLFO, PHILLIP T JR. Street Address (P.O. Box Number is Not Acceptable) BREENBERG TRAURIG, P.A. 777 S. FLAGLER DRIVE, #300E WEST PALM BEACH, FL 33401 Aurshine Lane Zip Code 33496 Raton exentity 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 President SIGNATURE. FILE NOW!!! FEE IS \$750.00 After January 1, 2005, Fee will be \$900.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. ☐ Delete TITLE Change \_\_\_ Addition 31111 Marbach, Carl MURBACH, CARL NAME NAME 1090 Ayrshire STREET ADDRESS 5455 N. FEDERAL HWY, SUITE O STREET ADDRESS BOCA RATON, FL 33487 CITY-ST-ZIP CITY-ST-ZIP Bora Raton 7000430435<sup>0 Chape</sup> ☐ Delete TITLE TITLE NAME 11/29/04--01060--012 \*\*750.00 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change NAME -MAME. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE []'Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST- ZIP CITY-ST-ZIP Change ☐ Delete TITLE Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP: -12. Thereby certify that the information supplied with this filling 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 of 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 of the corporation or the rec changed, or on an attachpe 761-483-113s President Marbach SIGNATURE: