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 # 1. Corporation Name

P04798

(5)

FILED Jan 23 1998 8:00am Secretary of State

TRAFFICOPTERS, INC.												
Principal Place of Business Mailing Address												
· ·												
17450 104 TERR. 17450 104 TERR. JUPITER FL 33478 JUPITER FL 33478												
									DO NOT WRITE IN THIS SPACE			
									3. Date Incorporated or Qualified	j		
2. Principal Place of Business 2a. Mailing Address									01/28/1985 4. FEI Number			pplied For
21	lace of Eddino.	26					35-1420209			ot Applicable		
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.								Additional		
22		27					5. Certificate of Status Desired			equired		
City & Stat	te	City & State					6. Election Campaign Financing		\$5.00	May Be		
23			28					Trust Fund Contribution			to Fees	
Zip	_	Country	Zip			untry	•		8. This corporation owes or has p	_		
24	25 9. Name and Address of Current			29 30				Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent			No	
			riogistorou	Agent	81 Name				10. Name and Address of New F	Jahreren an y	- Againt	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD						82						
	ANTATION FL					Street /	Addres	ess (P.O. Box Number is Not Acceptable)				
r.	ANIAHON FL											
						84	City			FL	85 Zip	Code
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was auth agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida. 							above-named corporation submits this statement for the				changing i	its registered
office or i	regi ster ed ager am fam iliar with,	it, or both, in the State o , an d a ccept the obligat	t Florida. Su ions of, Sect	ich change was a tion 607.0505, Flo	authorize orida Sta	ed by	the corp 3.	poration	n's board of directors. I hereby acc	ept the app	ointment as	s registered
SIGNATURE		,		,								
	Signature, typed or	printed name of registered agent					nt s gnature	required	when reinstaling)	DATE		
12.	570	OFFICERS AND	DIRECTOR	S DELETE	13.				ADDITIONS/CHANGES TO OFF	ICERS AND		
TITLE	PTD	C DICHADD M		FT DECEME	1.1 7						L Change	Addition
NAME	NAME FAIRBANKS, RICHARD M. STREET ADDRESS 22 E SNAPPER POINT DRIVE			1.2 N/								
	KEY LARG						ADDRESS					<u> </u>
CITY-ST-ZIP TITLE	SVD	O FL		DELETE	2.1 T	(T) F	1 - ZIP		······································		Change	Addition
NAME		RANDALL T.			2.2 N						L	
STREET ADDRESS		TH TERRACE					2.3 STREET ADDRESS					
CITY-ST-ZIP	ALIDITED C			2.40			J-ZIP					
TITLE	Ď			DELETE	3.1 T						Change	☐ Addition
NAME		MARY DIANE			3.2 N	AME	Ī					
STREET ADDRESS		ITH TERRACE		3.3 S			ADDRESS					
CITY-ST-ZIP	JUPITER F	<u>. </u>				CITY-S	1 - ZIP					
TITLE				☐ DELETE	4.1 T						☐ Change	Addition
NAME					4 21							
STREET ADDRESS					43S	TREET	ADDRESS					
CITY-ST-ZIP	-			☐ DELET E		ITY-SI	T-ZIP				☐ Change	Addition
TITLE				m pereie	5.1 To						LT CHANGE	L.J. AUGICIOII
NAME Street address					5.2 N		Annacce					
STREET ADUKESS						ITY-ST	ADDRESS					
TITLE				☐ DELETE	6.4 C		1 · 21P				Change	Addition
NAME				-	6.2 N							
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP					6.4 C							
44 15						:					216 21 22	-, ,,

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 annual report or supplemental annual 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 ampowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.