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May 19 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000000259 (1)

1. Corporation Name

A V.I.P. CHARTERS, INC.

Principal Place of Business

494 S.W. 28TH AVENUE
DELRAY BEACH FL 33445

Mailing Address

494 S.W. 28TH AVENUE
DELRAY BEACH FL 33445-4408



3. Date Incorporated or Qualified

10/26/1992

3a. Date of Last Report

05/01/1996

4. FEI Number

65-0363231

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

2. Principal Place of Business

21 754 SE 3rd Court

2a. Mailing Address

26 31 E. 2nd Avenue

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

23 Deerfield Beach, FL

28 City & State

28 Williamson, WV

24 Zip

24 33441

25 Country

25 U.S.

29 Zip

29 25661

30 Country

30 U.S.

9. Name and Address of Current Registered Agent

MITCHELL, MARK H
494 S.W. 28TH AVENUE
DELRAY BEACH FL 33445

10. Name and Address of New Registered Agent

81 Name

Mitchell, Mark H

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

754 SE 3rd Court

83 City

Marina Ship,

84 City

Deerfield Beach

FL

85 Zip Code

33441

11. Pursuant to the provisions of Sections 607.0502 and 607.0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/15/97

12. OFFICERS AND DIRECTORS

TITLE P DELETE
NAME MITCHELL, MARK H
STREET ADDRESS 494 SW 28TH AVE
CITY-ST-ZIP DELRAY BEACH FL 33445

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT Change Addition
1.2 NAME MARK H. MITCHELL
1.3 STREET ADDRESS 31 East Second Ave
1.4 CITY-ST-ZIP Williamson, WV 25661

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 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 12 or Block 13 if changed or if an appointment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/15/97 304/235-3902

CR2E034 (9/96)