FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	00000
DOCUMENT #	HOD MYYYY 50U0
1. Corporation Name	P9200005242

1.

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90270 028 ***150.00

1. Corporation Name							
Airland, Inc							
	•						
Disciplina (Business					_		
,	Principal Place of Business Mailing Address						
1	501 S. New York Ave 501 S. New York Ave.						
1	er Park, Florida	Winter Park,	, Florid	aa	DO NOT WRITE IN TH	IIS SPACE	
32789				3. Date Incorporated or Qualifed 11/12/1992			
2 Principal F	Place of Business	2a. Mailing Address			4. FEI Number	1 1 4.	pplied For
21					59-3162937		ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75	
22 27				5. Certifcate of Status Desired	Fee Re	equired	
<u> </u>	City & State City & State				6. Election Campaign Financing	\$5.00	
23			Country		Trust Fund Contribution	Added t	to Fees
Zip 24	Country Zip 25 29 30		30		This corporation owes the current year Personal Property Tax.	Intangible Yes	□No
[24]	9. Name and Address of Current	1 <u></u>	30		10. Name and Address of New Registere		
			81	Name		 	
	t P. Hold		82	Street Add	ress (P.O. Box Number is Not Acceptable)		
	. New York Ave.	100		Olloot Add	Test (1:3: Box Nambor to Net Necoptable)		
winte	r Park, Florida 327	89	83				
			84	City		L 85 Zip 0	Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statut	es, the above	-named corp	poration submits this statement for the purpose	of changing its	registered
office or i	registered agent, or both, in the State of am familiar with, and accept the obligation	Florida. Such change was a ns of, Section 607.0505, Flo	utnorized by i rida Statutes.	ine corporati	on's board of directors. I hereby accept the app	ontment as re	gisterea
SIGNATURE							
12.	Signature, typed or printed name of registered agent a OFFICERS AND		Registered Agent	signature require	ad when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	DPTS	DELETE	1.1 TITLE	T	7.25.113.tt.3.61.11.tt.2.6.1.13.61.tt	Change	Addition
NAME	Andrew Kouri		1.2 NAME				
STREET ADDRESS	501 S. New York Ave.		1.3 STREET	ADDRESS			
CITY-ST-ZIP	Winter Park, Florida		1.4 CITY-ST	-ZIP			
TITLE	Delegate D. Halif	☐ DELETE	2.1 TITLE			Change	☐ Addition
NAME	Robert P. Hold 501 S. New York Ave.		2.2 NAME				
STREET ADDRESS	Winter Park, Florida		2.3 STREET	1			
CITY-ST-ZIP TITLE	Willer Fark, Florida	DELETE	2.4 CITY-ST 3.1 TITLE	r-ZIP		☐ Change	☐ Addition
NAME		_ DELETE	3.2 NAME				
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			34. CITY-ST	r-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition
NAME							
STREET ADDRESS			43 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST	-ZIP		Chare	. Addition
TITLE)		5.1 TITLE 5.2 NAME	ļ		☐ Change	☐ Addition
NAME STREET ADDRESS			5.3 STREET.	ADDRESS I			}
STREET ADDRESS CITY-ST-ZIP				-ZiP			
TITLE		☐ DELETE	6.1 TITLE			☐ Change	Addition
NAME			62 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST	ZIP			

14. 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 truetee 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 on an attachment with an address, with abother like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E034 (11/98)