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 # P92000012625

LAND SEA & AIR, INC.

Principal Place of Business

Mailing Address

FILED Jan 23, 1999 8:00 am Secretary of State

01-23-1999 90017 027 ***150.00



394 E. EDNEY AVE. CRESTVIEW FL 32539		394 E. EDNEY AVE. CRESTVIEW FL 32539		DO NOT WIDITE IN	THE CDACE		
	•				DO NOT WRITE IN 1	HIS SPACE	
					3. Date Incorporated or Qualifed 01/06/1993		
2. Principal P	lace of Business	2a. Mailing Address	2a- Mailing Address		4. FEI Number	Ap	plied For
21		26			59-3154931	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5-Certificate of Status Desired. \$8.75 Additional Fee Required		
22 27 City & State City & State					6 Charlies Compaign Financing		
23 City & Stat	e	28	28		6 Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
Zip	Country	Žip	Country	1	8. This corporation owes the current year Intangible		
24	25 29 30		10	1 biconari Topony			□No
	9 Name and Address of Curr	ent Registered Agent		r	10 Name and Address of New Registe	red Agent	
			81	Name	•		
HERMAN, JEFFREY L			82	Street Add	ddress (P.O. Box Number is Not Acceptable)		
CRESTVIEW FL 32539			83				
			84	City	** * * * * * * * * * * * * * * * * * *	FL 85 Zip C	
TL Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statutes	the above	e-named corp	poration submits this statement for the purpos	e of changing its	registered
office or r	existered agent or both in the Sta	te of Florida. Such change was aut	norized by	the corporati	ion's board of directors. I hereby accept the a	ppointment as re-	gistered
agent. I a	m familiar with, and accept the obli	gations of, Section 607.0505, Florid	ia Statutes	•			
SIGNATURE	Signature, typed or printed name of registered a	cost and title if applicable (NOTE 5	Panietarod Ana	ot signature require	red when reinstating) DAT	E	
12.		AND DIRECTORS	13,	it algitulate require	ADDITIONS/CHANGES TO OFFICER		RS IN 12
TITLE	PTSV	DELETE	1.1 TITLE		() ()	☐ Change	☐ Addition
	HERMAN, JEFFREY L		1.2 NAME				
NAME	202 GRAND PRIX DR.			TADDRESS			.
STREET ADDRESS							
CITY-ST-ZIP	CRESTVIEW FL 32536	□ DELETE	1.4 CITY-S 2.1 TITLE	T-ZIP	'	Change	Addition
TITLE	DC	_					
NAME	rectification of any time.		2.2 NAME				[
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP	CRESTVIEW FL 32536		2. 4 CITY-5	ST-ZIP		☐ Change	Addition
TITLE	As the second	☐ DELETE	3,1 TITLE			□ Citalige	L Addition
NAME .			3.2 NAME				ļ
STREET ADDRESS	338		33 STREE	TADDRESS		** 人名约维纳德格	178 68 37
CITY-ST-ZIP			3.4. CITY-5	ST- ZIP			434, kill j.H
TITLE ·		☐ DELETE	4.1 TITLE	ł		t : ☐ Chánge :	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	T ADDRESS			
CITY-ST-ZIP]		4.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME	1		5.2 NAME				1
STREET ADDRESS			5.3 STREE	T ADDRESS			1
CITY-ST-ZIP	\$ 15		5.4 CITY- S	iT-ZIP	. · · · · · · · · · · · · · · · · · · ·		1
TITLE	. :	☐ DELETE	6.1 TITLE		<u></u>	Change	☐ Addition
	15 1 EV 3	_	6.2 NAME			·	1
NAME .	7731			T ADDRESS			
STREET ADDRESS	10.0		6.4 CITY-S				
CITY OF TIP	1		■ 0.4 UH T-3	0-6F I			1

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 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. On an attachment with an address, with all other like empowered.

SIGNATURE: