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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # P9300002024 (6)

AIR FLORA, INC.

FILED Jun 02 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address		t remtiddt til totan rett matt matt matt matt ante dette mete bint date bildt bet
PO BOX 1061 PO BOX 1061 APOPKA FL 32704 APOPKA FL 32704			DO NOT WRITE IN THIS SPACE
			3. Date Incorporated or Qualified
2. Principal Place of Business	2a. Mailing Address		01/11/1993 4. FEI Number Applied For
·	H1		
Suite, Apt. #, etc.	Suite, Apt #, etc.		CQ 75 Additional
22	27		5. Certificate of Status Desired Fee Required
City & State	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country	7 _{IP}	Country	8. This corporation owes or has paid the current year Intangible
24 25	29	30	Personal Property Tax due June 30. Yes [] No
9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
TREVINO, JOAN		81 N	Name
2001 BINION RD.		82 S	Street Address (P.O. Box Number is Not Acceptable)
~ APOPKA FL 32712		83	
•			
\		84 0	City FL 85 Zip Code
SIGNATURE Signature typed or punied name of registered agent r	riel fille if Zajgoor atale (NC	DIT Registered Agent s	he corporation's board of directors. I hereby accept the appointment as registered
TITLE PD OFFICERS AND I	DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
	☐ here i€	1.1 TITLE	Change Modified
NAME TIPPIT, WILLIAM STREET ADDRESS 642 EDEN PARK RD		1.2 NAME 1.3 STREET ADD	abaree .
CITY-SI-ZIP ALTAMONTE SPRINGS FL 3271	A	1.3 STREET ADE	\
TITLE SID	DELETE	2.1 TITLE	Change Addition
NAME SACKS, RACHEL		2.2 NAME	
STREET ADDRESS 642 EDEN PARK RD		2.3 STREET ADE	DRESS
CHTY-ST-ZIP ALTAMONTE SPRINGS FL 3271	4	2. 4 CITY-ST-Z	7IP
TITLE	DELETE	3.1 THIF	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADD	ODRESS
CITY-ST-ZIP		3.4 CITY-ST-Z	
TITLE	DELETE	4.1 TITLE	Change Addition
NAME		4 2 NAME	
STREET ADDRESS		43 STREET ADD	
CITY-ST-ZIP	DELETE	44 CITY - ST - ZI	ZIP Change Addition
THLE	[_] lightlif	51 TITLE	Change Addition
NAME OTHER ADDRESS		5.2 NAME	NOTICE .
STREET ADDRESS		5.3 STREET ADD	
CITY-ST-ZIP TITLE	DELETE	5.4 CITY - ST - ZI 6.1 TITLE	ZIP Change Addition
NAME	C D DECEMB	6.2 NAME	100025453 Quange
STREET ADDRESS		6.3 STREET ADD	ODRESS -06/03/3801010004) WY
OTHER RECORDS			

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 of 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, of on an attachment with an address.