## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996 **DOCUMENT #** 

P93000027846 (3)

Corporation Name

RD LAVIATION INC

DD3 W	VIATION, INC.							
Principal Place o	f Business	Mailing Address			1 19511457 116 1910 11111 45111 451			
113 CAT CA INDIAN HAR	Y LANE BOR BEACH FL 32137	113 CAT CAY LA Indian Harbor						
					3. Date incorporated or Qualified 04/14/1993	3a. Date of Last R 04/20/1		
2. Principal Plac	e of Business	2a, Mailing Address 26			4. FET Number 59-3226024	<b>▶-</b> +	Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apl. #, etc.	1		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State		City & State		<u></u>	6. Election Campaign Financing Trust Fund Contribution		O May Be d to Fees	
23   Zip	Country	Zη) 29	Country 30		8. This corporation has liability for			
24	25 g. Name and Address of Currer	· · · · · · · · · · · · · · · · · · ·	[30]		10. Name and Address of New R			
	g, stame and Address of Ourier		81	Name		<del></del>		
HANRAHAN, DONALD F 113 CAT CAY LANE INDIAN HARBOR BEACH FL 32137			82	Street Add	lress (P.O. Box Number is Not Acceptat	ile)		
			83	1				
			84	City		85 Z	p Code	
				1		FL		
or registere	ithe provisions of Sections 607.050. diagent, or both, in the State of Flori n, and accept the obligations of, Sec	ida. Such change was auth	orized by the corp	poration's box	ration submits this statement for the purific of directors. I hereby accept the app	ointment as registered	d agent. I am	
SIGNATURE s	i griature. Typied or printed harne of registered ages	it and title if accessable	(NOTE: Registered Age	 etsgrafin nague	ed whoo received alogic	DATE		
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFF			
T-TLF	D	DELETE	1 1 TITLE			Change	Addition	
NAME	HANRAHAN, DONALD F		1 2 NAME	F	outer, Calvin oo w. Bay Prive			
STHEE! ADDRESS	113 CAT CAY LANE INDIAN HARBOR BEACH F	32127				a 9 1		
CITY - S1 - 7IP	D INDIAN HANDON DEACH F	DELETE	1.4 C(TY - 2 1 T(T)	SI-ZIP	ocoa Beach FL 32	Change	☐ Addition	
TITLE	HANRAHAN, JILL		2 2 NAME	!				
NAME CALCET ADDRESS	113 CAT CAY LANE		•	LADDRESS				
STREET ADDRESS	INDIAN HARBOR BEACH F	1 32137	2 4 CITY -					
CHY-S1-ZIF TITLE		DELETE	3 1 HILE			☐ Change	Addition	
NAME		Bank 11 - 11	32 NAME					
STREET ADDRESS				ET ADDRESS				
C-1Y-ST-ZIP			34 CHY-					
TITLE		☐ DELETE	4 1 TIFLE			Change	Addition	
NAME			4.2 NAME					
STIFEET ADDRESS			4.3 STREE	1 ADDRESS				
CITY+SI-7IF			4.4 CHY-	S1-24P				
TIFLE		DELFTE	5 1 TITLE			☐ Change	Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	1 ADDRESS				
CITY - ST - ZIP			5.4 CITY-	ST-ZIP				
TITLE		December 15	6 1 THE	•		Change	☐ Addition	
NAME			6.2 NAME					
STREET ADDRESS			63 STREE	ET ADDRESS				
CITY - ST- ZIP			6.4 CITY -	S1-ZIF		07/041 51-74-59	to a lift white an	
14, I do hereb	certify that the information supplied	with this filing is voluntarily	furnished and do	es not qualify	for the exemption stated in Section 119	1.07(3)(k), Florida Statu n samo legal effect as	μtes. I turther if made under	

SIGNATURE:

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, or on an attachment with an address.

IGNATURE:

| 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 on an attachment with an address.

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| GNATURE: | Signature shall have the same legal effect as if made under oath and support of the corporation of the