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 # 1. Corporation Name P93000029725 (7)

AVIATION CHARTER CONSULTANTS, INC.

FILED Jan 20 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							7	4 (MAD (A D) (AR SRIEN (1))) NA (1) PO)	1 4 0111 80 118	(1818 1811 18868 (inal fill inat		
	2476 PACER LANE S COCOA FL 32926 Principal Place of Business Suite, Apt. #, etc. City & State Zip Country 25 9, Name and Address of Current JARDINE, THOMAS P 2476 PACER LANE S COCOA FL 32926 1. Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligate Signature. Typed or printed name of registered agent. Signature: Typed or printed name of registered agent. OFFICERS AND TILE DPS			2476 PACER LANE S COCOA FL 32926					DO NOT WE	ITE IN TH	IS SPACE		
								3. Da	ate Incorporated or Qualifie	d			
								\ n	4/22/1993				
2. Principal	Place of Busir	10SS	2a. Mailir	2a. Mailing Address					Number		A	pplied For	
21			26						59-3178482		N	lot Applicable	
	1. #, e tc.		Suite	Apt. #, etc.				i	ertificate of Status Desired	№		Additional	
22			27					3. 0.	Trinodic of Oldios Desired		Fee R	tequired	
	ate		— <u> </u>	City & State				1	6. Election Campaign Financing \$5.00 May Be				
23			Zip Country				Trust Fund Contribution Added to Fees						
	· ·			h			JIM Y		is corporation owes or has	•	_ ` -	ntangible ☑ No	
24 25 29 :						Personal Property Tax due June 3							
			Tom riegistores			81	Name	10		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	74 Mg - 14		
					-								
					1	82	Street Ad	dress (P.O.	Box Number is Not Accep	itable)			
U	UUUM FL 32	820			f	83							
						_							
						84	City			F	85 Zip	Code	
office or	registered ag	ent or both, in the St	ate of Florida, Suc	ch change was :	authorized	l hv t	named c he corpo	orporation s ration's boa	ubmits this statement for th rd of directors. I hereby ac	e purpose	e of changing i	its registered registered	
		in, and accept the or	ngations of cocti	0// 007.0000, 11	onde oldie	ics.							
SIGNATURE	Signature, typed	or printed name of registered	agent and title if applica	stile. (NOI	IE: Registered	Agent	signature re	quired when rein	stating)	DATE			
12.		OFFICERS .	AND DIRECTORS		13.				DITIONS/CHANGES TO OF	FICERS A			
TITLE				DELETE	1.1 T()	LE	I .	DPS			Change	Addition Addition	
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NAME CYPEET ADDRESS					6.2 NAM		appres						
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14. 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, or on an attachment with an address.

DPS