## 2001 UNIFORM BUSINESS REPORT (UBR)

## **FILED** Feb 06, 2001 8:00 am Secretary of State DOCUMENT # P93000042727 1. Entity Name LAKE AIR, INC. 02-06-2001 90292 025 \*\*\*150.00 Principal Place of Business Mailing Address 2121 N.W. 55 COURT #10 2121 N.W. 55 COURT #10 FORT LAUDERDALE FL 33309 FORT LAUDERDALE FL 33309 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-1416520 Not Applicable Zip Country Zip Country \$8.75 Additional Certificate of Status Desired. Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CREED, JERE D Street Address (P.O. Box Number is Not Acceptable) -499-N-W-70 AVE: #105 PLANTATION FL 33317 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGNATURE Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. PSTD VICE PRESIDENT **X** Delete TITLE ☐ Addition CREED, JERE D CREED, JERE D NAME NAME 1755 S.E. 7 STREET 8220 STATE RD. 84, #200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DAVIE FL CITY-ST-ZIP FT. LAUDERDALE, FL 33316 PRESIDENT ☐ Change **Addition** TITLE ☐ Delete TITLE BUCCARELLI, RONALD NAME 2121 NW 55 COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE, FL 33309 SECRETARY ☐ Delete TITLE ☐ Change Addition TITLE CREED, KAREN NAME NAME 1755 S.E. 7 STREET STREET ADDRESS STREET ADDRESS FT. LAUDERDALE, FL 33316 CITY-ST-ZIP CITY-ST-ZIP TREASURER ☐ Delete TITLE ☐ Change **Addition** TITI F BARR, DANIEL 8220 STATE ROAD 84,#200 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DAVIE. FL 33324 Change ☐ Addition TITI F ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an addiese, with all other like empowered.

x Feb 2, 2001 (954) 771-3