SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/08: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #
1. Corporation Name

P93000049919 (2)

G.I. AVIATION, INC.

Principal	Place	of Bus	iness

FILED Aug 26 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address		(searced) his cases from serin serin serin serin serin seria lette cases inter little seri little
2000 S. DIXIE	HIGHWAY	2000 S. DIXIE HIGHWAY		1
	SUITE 100 SUITE 100		DO NOT WRITE IN THE SPACE	
MIAMI FL 3313	3	MIAMI FL 33133		DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified
2 Dringia d B	Non- of Durings	On Mailing Address		07/16/1993 4. FEI Number Applied For
Z. Principal P	Place of Business UNCOLN Rd#5B	2a. Mailing Address 26 407 CINC	ol RAHUB	
Suite, Apt.	# cla	Suite, Apt. #, etc.	THE ROTIGE	65-0426308 Not Applicable
	#, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Regulred
City & Stat		City & State		
23	iami Beach Fl	City & State	BeachFC	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	7in	Country	
24 T33	3139 25 Dade	z ₁ 33139	30 Dade	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No
24 -	9. Name and Address of Current I		[30]	10. Name and Address of New Registered Agent
HIIV	SMAN, MICHEL	togistorou rigotti	81 Name	A A I
	S. DIXIE HIGHWAY			George BRItO.
1			82 Street Add	ress (P.O. Box Number is Not Acceptable)
1	E 100		83	40) UNCOIN RS # S.B
MIA	VII FL 33133		{**}	}
			84 City	Duran Boards FI 85 Zip Code 29
11. Pursuant	t to the provisions of sections 697,0502 a	nd 607#1508, Florida Statute Florida Such change was a	es, the above-named corpo	pretion submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered
agent. I a	am familiar with, and an other obligation	ons of section 607.0505, Flo	orida Statutes.	a Language and a lang
SIGNATURE	42-	1/4		88//1/98
<u> </u>	Signature, typed or printed name of registered agent a		OTE: Registered Agent signature req	······
12.	OF ICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D D	☐ DELETE	1.1 TITLE	L_J Change L_J Addition
NAME	GAILLARD, PHILIPPE J		1.2 NAME	
STREET ADDRESS	345 GULF ROAD		1.3 STREET ADDRESS	,
CITY-ST-ZIP	KEY BISCAYNE FL		1.4 CITY-ST-ZIP	
TITLE	AS	DELETE	2 1 TITLE	Change Addition
NAME	HUYSMAN, MICHEL	•	2.2 NAME	
STREET ADDRESS	2000 S. DIXIE HWY., STE. 100		2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33133		2.4 CITY-ST-ZIP	
TITLE	_	DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		DELETE	4.1 TITLE	Change Addition
NAME			4.2 NAME	
STREET ADDRESS	 		4 3 STREET ADDRESS	
CITY-\$1-ZIP			4.4 CITY-ST-ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME	}	<u></u>	5.2 NAME	34446464655
STREET ADDRESS			5.3 STREET ADDRESS	-08/26/38-1010280/8
CITY-ST-ZIP			5.4 CHTY-ST-ZIP	***800100
TITLE		DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	40000000000000000000000000000000000000
STREET ADDRESS			6.3 STREET ADDRESS	400002625364 -08/26/98010260 48
CITY-ST-ZIP			6.4 CITY-ST-ZIP	***300.00
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(a. 61);		Slion 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.

SIGNATURE

305-534-9292