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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 29 1997 8:00am

Secretary of State

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Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000061462 (6)

SUNQUEST AVIATION, INC.

Principal Place of Business Mailing Address 11600 AYIATION BLYD. 17611 123RD TERR N								
PALM BE	VIATION BLVD. EACH GARDENS FL 33412	JUPITER FL 33478-4677 US						
US		00		3	Date Incorporated or Qualified 09/01/1993	3a. Date of La		
2. Princ 21	cipa! Place of Business	2a. Mailing Address 26		4	. FEI Number 65-0429708		Applied For Not Applicab	
remark a reason of	Apt. # etc.	Suite, Apt. #, etc.		5	. Certificate of Status Desired	1 1 ****	75 Additional e Regulred	
	& State	City & State	·	6	Election Campaign Financing Trust Fund Contribution		.00 May Be	
Zip	Country	Ζφ	Country	8	. This corporation has liability for in			
24	25 9. Name and Address of Cur		30	10	Florida Statutes Name and Address of New Reg			
	WHALEN, TIMOTHY L		81 Nan			7		
	400 AUSTRALIAN AVENUE SOUT	Н	82 Stre	et Address /	P.O. Box Number is Not Accernati	(e)		
	WEST PALM BEACH FL 33401			_5	en e	-		
			[Fa]		e por transfer and the			
			84 City		-	FL 85	7in Carl	
11 Pur	suant to the provisions of Sections 607.0	0502 and 607 1508 Florida Statute	s the above-nam	ひてい。 ed corporati	on submits this statement for the n		ing its registere	
offic	ce or registered agent, or both, in the St ent. I am familiar with, and accept the ob-	ate of Florida Such change was a	uthorized by the o	orporation's	board of directors. I hereby accep	t the appointmen	nt as registered	
_	·	silgations of, Section 607,0305, Flor	inda Statutes.			•		
SIGNAT		agent and time r applicable. (NOTE	Registered Agent signa	ture required whe	en reinsleting)	DATE		
12.	OFFICERS.	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIREC	TORS IN 12	
TITLE	PD	DELETE	1.1 TITLE			Cha	inge 🔲 Additio	
NAME	GETZ, JENIFER		1.2 NAME					
STREET ADI			1.3 STREET ADDRES	SS	•			
CITY - ST - Z			1.4 CITY-ST-ZIP					
THILE	VD	DELETE	2.1 TITLE			☐ Cha	inge 🔲 Additio	
NAME	GETZ, DAN		2.2 NAME					
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NAME STREET ADI	nnece		3.2 NAME 3.3 STREET ADDRES	20				
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CHY-ST-Z	716		5.4 CITY-ST-2IP					
TillsE		☐ DELETE	6.1 TrTLE			Cha	ange 🔲 Additio	
NAME			6.2 NAME					
STREET ADI	ORESS		6.3 STREET ADDRES	ss				
CITY - S1 - Z			6.4 City-St-2iP		**************************************			
14. Edo	hereby certify that the information support in hereby certify that the information indicated on this annual report in	olled with this filing does not qualify	for the exemption	n stated in S	section 119.07(3)(i), Florida Statutes	s. I further certify	that the	
Lan	n an officer or director of the corporation pears in Block 12 or Block 13 if changed	n or the receiver or trustee empower	ered to execute th	is report as	required by Chapter 607, Florida S	tatutes; and that	my name	