

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

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Feb 02 1998 8:00am
Secretary of State



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PROFIT CORPORATION ANNUAL REPORT 1998	 FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000062242 (1)

1. Corporation Name
FLORIDA KEYS COPTERS, INC.

Principal Place of Business	Mailing Address
OPA LOCKA AIRPORT BUILDING 137 MIAMI FL 33054 US	115 NW 32ND COURT MIAMI FL 33125

2. Principal Place of Business	2a. Mailing Address
21. <i>Tamiami Executive Airport</i>	25. <i>Suite, Apt. #, etc.</i>
22. <i>14532 SW 129 ST</i>	27. <i>City & State</i>
23. <i>Miami FL</i>	28. <i>City & State</i>
24. <i>33186</i>	29. <i>Country</i>
25. <i>00000</i>	30. <i>Country</i>

3. Date Incorporated or Qualified	Applied For
09/07/1993	Not Applicable
4. FCI Number	Applied For
65-0477584	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
☐	
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
☐	
8. This corporation owns or has paid the current year intangible Personal Property Tax due June 30	☐ Yes ☐ No

9. Name and Address of Current Registered Agent

KNIGHT, JEFFERSON P
701 BRICKELL AVENUE
SUITE 1200
MIAMI FL 33131

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
FL 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (Note: Registered agent signature required when registering)

12. OFFICERS AND DIRECTORS	
TITLE	PVPT
NAME	BILLBERRY, JAMES R
STREET ADDRESS	115 NW 32ND COURT
CITY-ST-ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11. TITLE	☐ Change ☐ Addition
12. NAME	
13. STREET ADDRESS	
14. CITY-ST-ZIP	
21. TITLE	☐ Change ☐ Addition
22. NAME	
23. STREET ADDRESS	
24. CITY-ST-ZIP	
31. TITLE	☐ Change ☐ Addition
32. NAME	
33. STREET ADDRESS	
34. CITY-ST-ZIP	
41. TITLE	☐ Change ☐ Addition
42. NAME	
43. STREET ADDRESS	
44. CITY-ST-ZIP	
51. TITLE	☐ Change ☐ Addition
52. NAME	
53. STREET ADDRESS	
54. CITY-ST-ZIP	
61. TITLE	☐ Change ☐ Addition
62. NAME	
63. STREET ADDRESS	
64. CITY-ST-ZIP	

14. 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 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: *James R. Billberry* 1/14/98 305 2772234

CR2E034 (10/97)