

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000063832 (8)

1. Corporation Name

AIR LINK EXPRESS, CORP.



Principal Place of Business

7225 N.W. 25 ST
115
MIAMI FL 33122
US

Mailing Address

7225 N.W. 25 ST
115
MIAMI FL 33122
US

3. Date Incorporated or Qualified
09/14/1993

3a. Date of Last Report
04/26/1995

4. FET Number
65-0435547

Applied For
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 has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

ORNSTEIN, FERNANDO
7225 NW 25 ST
SUITE 111
MIAMI FL 33122

81 Name
FERNANDO ORNSTEIN
82 Street Address (P.O. Box Number is Not Acceptable)
7225 N.W. 25 ST
83 SUITE 111
84 City
MIAMI FL 85 Zip Code
33122

11. Pursuant to the provisions of Sections 607.0502 and 607.15 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 607.0502 Florida Statutes.

SIGNATURE

(Signature, typed or printed name of officer or director, and date of appointment)

(If FET Registered Agent, signature not required when reappointing)

DATE

4-

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
VD	ORNSTEIN, FERNANDO	10521 SW 158 CT #107	MIAMI FL	☐
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	5. CHANGE	6. ADDITION
1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	☐	☐
2. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	☐	☐
3. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	☐	☐
4. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	☐	☐
5. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	☐	☐
6. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	☐	☐
7. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	☐	☐
8. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	☐	☐
9. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	☐	☐
10. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	☐	☐

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 in an attachment with my address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FERNANDO ORNSTEIN

305-591-1111

CR2E034 (12/95)