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Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000076852⁰¹(1)
1. Corporation Name
AIRBORNE VIDEOGRAPHY INCORPORATED

Principal Place of Business Mailing Address
4388 COPPERHEAD DRIVE 4388 COPPERHEAD DRIVE
PACE, FL 32571 PACE, FL 32571

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
21 6503 TERRASANTA 26 6503 TERRASANTA
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 FL 27 FL
City & State City & State
23 PENSACOLA 28 PENSACOLA
Zip Country Zip Country
24 32504 25 ESCAMBIA 29 32504 30 ESCAMBIA

3. Date Incorporated or Qualified
11/01/93
4. FEI Number 59-3211062 Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required
6. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution Added to Fees
8. This corporation owes the current year in angle
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
BANKS, JEFFERY L
4388 COPPERHEAD DRIVE
PACE FL 32571

81 Name BANKS, JEFFERY L
82 Street Address (P.O. Box Number is Not Acceptable)
6503 TERRASANTA
83
84 City PENSACOLA FL 85 Zip Code 32504

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 Jeffery L. Banks JEFFERY L. BANKS DIRECTOR 4/14/99
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS
TITLE D ☐ DELETE
NAME BANKS, JEFFERY L
STREET ADDRESS 4388 COPPERHEAD DR.
CITY-ST-ZIP PACE FL 32571
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE D ☒ Change ☐ Addition
1.2 NAME BANKS, JEFFERY L ADDRESS ONLY
1.3 STREET ADDRESS 6503 TERRASANTA
1.4 CITY-ST-ZIP PENSACOLA, FL 32504
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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, with all other like empowered.

SIGNATURE: Jeffery L. Banks JEFFERY L. BANKS 4/14/99 850 476 0370
DIRECTOR Date C daytime Phone #

CR2E034 (11/98)