2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **P94000003832** Jul 18, 2000 8:00 am 1. Entity Name **Secretary of State** ABLE AIRPORT & TRANSPORT SERVICE INC. 07-18-2000 90017 032 ***150.00 Principal Place of Business Mailing Address 106 COMMERCE WAY #A-9 106 COMMERCE WAY #A-9 JUPITER FL 33458 JUPITER FL 33458 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0465545 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MAROTTA, KAREN Street Address (P.O. Box Number is Not Acceptable) 106 COMMERCE WAY #A-9 JUPITER FL 33477 Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. PTD Addition TITLE Delete TITLE ☐ Change MAROTTA, KAREN NAME STREET ADDRESS STREET ADDRESS 107 OCEAN COVE DR CITY-ST-ZIP CITY-ST-ZIP JUPITER FL SD ☐ Addition TITLE Delete TITLE ☐ Change MAROTTA, VINCENT NAME NAME STREET ADDRESS STREET ADDRESS 107 OCEAN COVE DR CITY-ST-ZIP CITY-ST-ZIP JUPITER FL Change -☐ Addition TITLE Defete TITLE RYANN MAROTTA NAME NAME STREET ADDRESS STREET ADDRESS 107 OCEAN COVER DR CITY-ST-ZIP CITY-ST-7IE JUPITER FL ☐ Addition ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS ¢ CITY-ST-7IP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Change TITLE Delete STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.



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Charters

Tours

Events

Division of Corp.

Tallahassee, Fl 32314

Seaports To Whom it may concern

We never received our first notice to file for the annual report this past year. If you review previous years you will see this was always taken care of in a timely manner. Thank you

Law Harotte

Sincerely

Karen Marotta-

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