FILED

Jan 21, 2003 8:00 am Secretary of State

01-21-2003 90602 016 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P94000003832 **DOCUMENT #**

1. Entity Name

ABLE AIRPORT & TRANSPORT SERVICE INC.

•	ce of Business CE WAY #A-9 3458	Mailing Address 106 COMMERCE WAY #A-9 JUPITER FL 33458				
2. Principal Place of Business		3. Mailing Address		-{	38 (1) 31 (10) 50 (1) 31 (1 6) (18) (18)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES		
City & Stat	te	City & State		4. FEI Number 65-0465545	Applied For Not Applicable	
- Zip	· Country	Zip -	Country		8.75 Additional	
	6. Name and Address of Current I	lRegistered Agent		7. Name and Address of New Registered Ag		
			Name		,	
MAROTTA, KAREN			Street Address	Street Address (P.O. Box Number is Not Acceptable)		
106 COMMERCE WAY #A-9 JUPITER FL 33477						
00111211			City	FL	Zip Code	
	named entity submits this statement for tions of registered agent.	the purpose of changing its reg	jistered office or registe	ered agent, or both, in the State of Florida. I am fai	miliar with, and accept	
SIGNATURE	,					
	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE: Re	egistered Agent signature require	ad when reinstating) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10.	OFFICERS AND I	DIRECTORS				
TITLE	PTD	PINECTONS	11.	ADDITIONS/CHANGES TO OFFICERS AND D	DIRECTORS IN 11	
NAME	1 1 P	Delete	11.		DIRECTORS IN 11	
	MAROTTA, KAREN		· · · · · · · · · · · · · · · · · · ·			
STREET ADDRESS	MAROTTA, KAREN 107 OCEAN COVE DR		TITLE NAME STREET ADDRESS			
STREET ADDRESS CITY-ST-ZIP	MAROTTA, KAREN 107 OCEAN COVE DR JUPITER FL	☐ Delete	TITLE NAME		Change Addition	
CITY-ST-ZIP	MAROTTA, KAREN 107 OCEAN COVE DR JUPITER FL SD		TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			
CITY-ST-ZIP TITLE NAME	MAROTTA, KAREN 107 OCEAN COVE DR JUPITER FL SD MAROTTA, VINCENT	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		Change Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS	MAROTTA, KAREN 107 OCEAN COVE DR JUPITER FL SD MAROTTA, VINCENT 107 OCEAN COVE DR	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		Change Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MAROTTA, KAREN 107 OCEAN COVE DR JUPITER FL SD MAROTTA, VINCENT 107 OCEAN COVE DR JUPITER FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	Change Addition Change Addition	
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SIGNATURE:

CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.