

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000035485

1. Entity Name
BRAMAN AVIATION, INC.



FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90378 022 ***158.75

0296120 AV

Principal Place of Business
2060 BISCAYNE BLVD
2ND FL
MIAMI FL 33137
US

Mailing Address
2060 BISCAYNE BLVD
SECOND FLOOR
MIAMI FL 33137-024
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0490254

Applied For
☒ Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KRIEGER, STANLEY J
2060 BISCAYNE BOULEVARD
SECOND FLOOR
MIAMI FL 33137

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required 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 DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME BRAMAN, NORMAN
STREET ADDRESS 2060 BISCAYNE BLVD, SECOND FLOOR
CITY-ST-ZIP MIAMI FL 33137-5024 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S
NAME KRIEGER, STANLEY J.
STREET ADDRESS 2060 BISCAYNE BOULEVARD, 2ND FLOOR
CITY-ST-ZIP MIAMI FL 33137-5024 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE PD
NAME BRAMAN, NORMAN
STREET ADDRESS 2060 BISCAYNE BLVD SECOND FLOOR
CITY-ST-ZIP MIAMI FL 33137 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE T
NAME BERNSTEIN, ROBERT
STREET ADDRESS 2060 BISCAYNE BLVD SECOND FLOOR
CITY-ST-ZIP MIAMI FL 33137 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Stanley J. Krieger, Secretary

04/25/03 (305) 576-1889

Date

Daytime Phone #

CR2E034 (10/02)