## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000046670 (3)

ACME AIR OF SOUTH FLORIDA, INC.

## **FILED** Feb 04 1998 8:00am Secretary of State



Principal Place of Businoss Mailing Address							*
225 S.W. 33RD ST. FT LAUDERDALE FL 33315			225 S.W. 33RD ST. FT LAUDERDALE FL 33315				DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualified
							06/22/1994
2. Principal Place of Business			2a. Mailing Address				4. FEI Number Applied For
21			26				65-0523878 Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				<b>5.</b> Certificate of Status Desired S8.75 Additional Fee Required
City & State			City & State			WF 71.4 A A.A.	6. Election Campaign Financing \$5.00 May Be
23			28				Trust Fund Contribution Added to Fees
Zip	Country		Zip Countr				8. This corporation owes or has paid the current year Intangible
24	9. Name and Address of Current	29 Registe	red Agent	30	_		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent
VA	ROSH, ARTHUR R	Tiograto	ioo Agont		81	Name	
	5 S.W. 33RD ST.						
FORT LAUDERDALE FL 33315					82	Street	et Address (P.O. Box Number is Not Acceptable)
, 0	THE PERSON NEW YORK				83		
					84	City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statules, 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statules.							
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOT) Registered Agent signature required when reinstating)  DATE							
12.	OFFICERS AND			13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DP		☐ DELETE	1179	1LE		Change Addition
NAME	YAROSH, ARTHUR R		1.21		1.2 NAME		
STREET ADDRESS	225 S.W. 33RD ST.		1.3 \$1		I ABR	ADDRESS	25
CITY-ST-ZIP	FT LAUDERDALE FL 33315				1.4 CiTY - S1 - ZiP		
TITLE	D		☐ DELEŤE	2.1 Ti	TLF		Change Addition
NAME	BROYLES, ROBERT			2.2 N	AME		
STREET ADDRESS	2046 N.E. 15 ST.		2.3 \$			ADDRESS	os
CITY-ST-ZIP	FT LAUDERDALE FL 33304				iTY-S	T - 7IP	
TITLE					3.1 TITLE		Change Addition
NAME				3.2 N			
STREET ADDRESS						ADDRESS	55
CITY-ST-ZIP TITLE	DEL			3.4. C	ITY - S TI F	1-717	Change Addition
NAME				4. 2 N			
STREET ADDRESS						ADDRESS	28
CITY-ST-ZIP				4.4 CI			
TITLE			DELETE	5.1 TI			1 Change Addition
NAME				5 2 N/	<b>AME</b>		
STREET ADDRESS				5.3 S1	REET	ADDRESS	$s \mid M \mid \gamma \mid / \rho c / $
CITY-ST-ZIP				5.4 CI	1Y-S1	- ZIP	JW 3/4/71
TITLE			☐ DELETE	611	TLE		600002421555Change Addition
NAME				6.2 NA	AME		-02/04/9801087007
STREET ADDRESS				6.3 \$1	REET	ADDRESS	***150.00
CITY-ST-ZIP				6.4 CI			
14. Thereby o	ertify that the information supplied wit	h this filu	ng does not qualify for	or the exe	empt	ion state	ated in Section 119.07(3)(i), Florida Statutes. I further certify that the information

indicated on this annual report or supplemental armual 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 or arrangement with an advices.