## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT

1996

Principal Place of Business

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P94000059449	(6)
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## PRECISION AIR SUPPORT, INC.

7268 NW 25TH MIAMI FL 331		P.O. BOX 52-1206 MIAMI FL 33152-1206 US		Date Incorporated or Qualified     08/12/1994	3a. Date of Last Report 03/22/1995	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
190	5 N.W. 93 AVENU	E 26 1905 N.W.	93 Avenue	65-0511736	Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City P. Cant		City & State	<u>-u-</u>	6. Election Campaign Financing	55.00 May Be	
City & State	MI FLORINA	28 MIAMI F	LORIBA	Trust Fund Contribution	Added to Fees	
Zip 33/		28 MINMI, F 219 29 33172	Country 10 USA		Yes No	
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Rec		
NΔ	VARRO, SERGIO F		81 Name S	RGO F. NAVARI	e0	
	88 NW 25TH ST		LOS: Stroot Addi	82 Street Address (P.O. Box Number is Not Acceptable) 1905 N. W. 93 AVENUE		
	AMI FL 33122		83	05 N.W. 73 AUG	, wa c	
			84 City		FL 85 710 Code 33/72	
				oration submits this statement for the pulon's board of directors. Thereby accept		
SIGNATURE		pent and life if applicable (NOTE) NO DIRECTORS	Registered Agent signature requi	AVALLO 7- red when rensisting?  ADDITIONS/CHANGES TO OFFIC	DAIE	
12. TITLE	T	ND DIRECTORS DELETE	1.1.7171.5	1	Change Addition	
NAME	D NAVARRO, SERGIO F		10000	ERGIO F. NAVARRO	•	
STREET ADORESS	7268 NW 25TH ST		1.3 STREET ADDRESS	905 N.W. 93 AUST	out t	
STY-ST-ZIP	MIAMI FL 33122			4. MMI, FLORIBA	33172	
ITLE	THE WILL I L. OVICE	DELETE	2 1 THELE		Change Additi	
AME			2.2 NAME			
TREET ADDRESS			2 3 STREET ADDRESS			
CITY - ST - ZIP			2 4 CITY - ST-ZIP		Observa Addition	
HTLE		DELETE	3 1 TITLE		Change Additi	
LAME			3 2 NAME			
STREET ADDRESS			3 3 STREET ADDRESS			
CITY-ST-ZIP			3.4 CITY -ST - ZIP		Change Addit	
TITLE		DELETE	4 1 TITLE		E Change [] Addit	
NAME			4 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP	1		4 4 CITY - ST - ZIP			

6 4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this fing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(x). 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 617, Florida Statutes, and that my name appears in Big 12 or Block 13 if changed, or on an attachment with an address

5.1 TITLE

52 NAME

61 TITLE

6.2 NAME

5 3 STREET AUDRESS

63 STREET ADDRESS

5 4 CITY - ST - ZIP

DELETE

DELETE

SENGO F. NAVARRO SIGNATURE: 🔀

Change Addition

Change Addition