FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P94000090834 (0)

WINGS EXPRESS, INC.

DOCUMENT #

Principal Place of Business

Mailing Address

16812 ROYAL POINCIANA DRIVE

16812 ROYAL POINCIANA DRIVE FORT LAUDERDALE FL 33326		FORT LAUDERDALE FL 33326		- O old of	3a. Date of Last Report
				 Date Incorporated or Qualified 12/15/1994 	01/17/1995
Brigainal Place	of Rusiness	2a. Mailing Address		4. FEI Number 65-0542218	Applied For Not Applicable
t. Principal Place of Business		26	} η		CO 75 Addisort
Suite, Apt #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Required
		27		2 First Commiss Figureing	\$5.00 May Be
City & State		City & State		Election Campaign Financing Trust Fund Contribution	Added to Fees
3		28	Country	This corporation has liability for	intangible tax under s 199.032,
Zip	Country	2ιρ [77]	30]	Florida Statutes Yes	. INO
4	25	29 Agent	1301	10 Name and Address of New F	Registered Agent
	9. Name and Address of Cu		81 Name		BER
		Pelete		JOSEPH GKE, ddress (P.O. Box Number is Not Acceptat	ole)
AMERILA'	WYEH		82 Street Ac		
343 ALM	ERIA AVENUE		83 17	221 6 11 65	CT
CORAC	GABLES FL 33134		17	331 7. W. UZ	85 Zip Code
			84 City	331 S.W. 65 + Yauderdale	FL 85 Zip Code 3/
/		0502 and 607,1508, Florida Stat	utes, the above-named cor	expressional surbrings this statement for the pu	irpose of changing its registered office
11. Pursuant to	i the provisions of Sections 607. Id agent, or both, in the State of	.0502 and 607, 1508, Honda Stat Florida Suich change was autho Section 607, 0505, Florida Statut	rized by the corporation's b	oard/f directors. I hereby accept the app	pointment as registered agent. I am
familiar with	n, and accept the obligations of.	Section 607,0505, Florida Statut	$^{\circ}$ M_{0} .	18/26 1/5/	'/U/ /
0.00.47.400	TOSEPH	GKUDUK	Michelen Agent's gnates	A section for the section of the sec	CMTE
	Surrature, typed or protect can allo reporterer	S AND DIRECTORS	13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12
12.	D OFFICE OF THE PERSON OF THE	[] KLEIL	1 1 TiTLE		Change Addition
TITLE	GREBER, JOSEPH		1.2 NAME		
NAME	16812 ROYAL POINCIANA DRIVE		1.3 STREET ADDRESS		
STREET ADDRESS			14 CITY - ST - ZiP		Change Addition
CITY - ST - ZIP TITLE	10(110111111111111111111111111111111111	DELETE	2 1 TITLE		Change Addition
NAME			2.2 NAME		
			2.3 STREET ADDRESS		
STREET ADDRESS			2.4 CITY - ST - ZIP		Change Addition
CITY-ST-ZIP TITLE	DELETE		3 1 TallE		Change [Madulon
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREEF ADDRESS		
CITY - ST - ZIP			3.4 CITY - ST - ZIP		Change Addition
TITLE	DELETE		4 1 TITLE		C. Orleange C. Frances
NAMÉ			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-S1-ZIP			4.4 CiTY - \$1 - ZIP		Cnange Addition
THLE		☐ DELETE	5 1 MLE		المسيا المحاودة والبيا
NAME			5.2 NAME	İ	
STREET ADDRESS			5.3 STREET ADORESS		
CITY - ST - ZIP			5 4 CITY - ST - 7(P		Change Addition
TITLE		DELETE	6 1 TIILE	7000017 -04/17/960 ***208,75	784377°°°,
NAME			62 NAME +	-n4/17/960	1084001、いてんし
STREET ADDRESS			63 STREET ADDRESS	±±±209 75	
1	1		6.4 CiTY - \$1 - 7IP	7.7.7.200.10	

14. Ido heretry certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption state. If Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signary is shall have the same legal effect as if made under certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Cripter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an altachment with an address