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.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

AIR & SEA SUPPORT GROUP, INC.					
Principal Place	e of Business	Maiting Address		"-" I IOONIOON KAO IRIKH DIONI DONI BAHK QOAR BOKQ	LANSAN COURT ORDER WOUND BIRT 1980
707 S.W. 7TH ST. FT LAUDERDALE FL 33315 707 S.W. 7TH ST. FT LAUDERDALE FL 33315 FT LAUDERDALE FL 33315			15		
				1	Date of Last Report 08/15/1995
2. Principal P	lace of Business	2a. Mailing Address	-11 ()	4. FEI Number	Applied for
21 707	SW7m St	26 707 50	77m 2t	65-0541533	Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State Fort	Lavol.	6. Election Campaign Financing	\$5.00 May Be
23 FOOT	Louderdale, H	26 FOTO	FI.	Trust Fund Contribution	Added to Fees
^{Zp} 24 スろる	Country A	Zip 322K	Country 30 ().5.A.	8. This corporation has liability for intangi	
24 333	9. Name and Address of Current	29 33315 Registered Agent	30 0.5.14.	Flonda Statutes Yes 10. Name and Address of New Registers	L
CORPORATION INFORMATION SERVICES INC.			10. Haine and Address of New Register	ru Agent	
			82 Street Addr	ass (P.O. Box Number is Not Accountable)	
			82 Street Address (P.O. Box Number is Not Acceptable)		
. Le	EN MODEL 1 E DESC1		83		
-			84 City		. 85 Zip Code
		100711000		F	· L
office or ri	egistered agent, or both, in the State of	Florida Such change was a	uthorized by the corporation	oration submits this statement for the purpose on's board of directors. Thereby accept the ap	of changing its registered pointment as registered
agent La	m familiar with, and accept the obligati	ons of, Section 607.0505. Flo	orida Statutes	, , ,	
SIGNATURE	Signature, typica or prode on arrie of registers Lagran.	and the diapply able (N.C)	F. Registered Agent signarure region	id when mosturing. [BA]	· · · · · · · · · · · · · · · · · · ·
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	DPST	DELETE	1.1 TATLE		Change Addition
NAME	ELEY, LISA		1.2 NAME		
STREET ADDRESS	707 S.W. 7TH ST.		1 3 STREET ADDRESS		
CITY-ST-ZIF	FT LAUDERDALE FL 33315		1 4 CITY -ST - ZIP	W-17	<u> </u>
TITLE NAME	DV	DELETE	2 1 TITLE		Change Addition
STREET ADDRESS	ELEY, F. CANNON 707 S.W. 7TH ST.		2.2 NAME 2.3 STREET ADORESS		
CITY - ST - ZIP	FT LAUDERDALE FL 33315		2 4 CITY - ST - ZIP		
TITLE	TT ENODERIDALE JE 00010	DELETE	3171116		Change Add tion
NAME			3 2 NAME		_ ,
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST ZIP			3.4 CITY-ST-ZIP		
TITLE		DELETE	4 1 TillE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4 4 CITY - S1 - ZIP		Change Lat.
NAMÉ		[] Derrig	5 1 TITLE		Change Addition
STREET ADDRESS			5 2 NAME 5 3 STREET ADDRESS		
CITY - ST - ZIP			5 4 City - St - ZiP		
TITLE		DELETE	61 111LE		Change Addition
NAME			6.2 NAME	1000019193 -08/12/9601048	020 8/
STREET ADDRESS			63 STREET ADDRESS	***225.00	020 0/10
CITY-ST-ZIP			6 4 CITY - ST - ZIP		(")
14. I do hereb	by certify that the information supplied that the information indicated on the	vith this filing is voluntarily fur	rnished and does not quali	fy for the exemption stated in Section 119 07(nd accurate and that my signature shall have	3)(k), Florida Statutes 1

made under oath, that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 617, Flurida Statutes, and that my name appears in Block 12 or Block 13 if changed for on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OFFICER OR DIRECTOR