PROFIT CORPORATION ANNUAL REPORT 1996			AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS				
DOCUN	1ENT # P9	5000008	8474 (5	5)			
1. Corporation	Name CLE SERVICES AVIA		•	,			
FINNAS							
Principal Piace of Business Ma			g Address				
351 6TH AVE. WEST BRADENTON FL 34205			6TH AVE. WEST DENTON FL 3420				
DRADENTON	FL 34203	DNA	UENTUN FL 3420	2	3. Date incorporated or Qualified	3a. Date of Last Report	
A D					01/27/1995 4. FELNumber		
2. Principal Place	ce of Business	28. Ma	alling Address		45-0573818	Applied I Not App	
Suite, Apt. #	, etc.	Su 27	ite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Addition Fee Required	
City & State		Cit	y & State	· · · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing	5.00 May 1	3e
23	Country	28 Zıp)	Country	Trust Fund Contribution 8. This corporation has hability for i	Auded to Fee	
24	25 9. Name and Address of	29	A dent	30	Florida Statutes X Yes 10. Name and Address of New R		
1 1				81 Name			
	N, G. Joseph Esq. Natee ave. West			82 Street Add	ress (P.O. Box Number is Not Acceptab	le)	
	TON FL 34205			83			
				84 City	~ ~ ·····-	FI 85 Zip Code	
familiar wit	the provisions of Sections d agent, or both, in the Stat and accept the obligation	607.0502 and 607.15 le of Florida Such ch s of, Section 607.050	508, Florida Statu ange was authori 5, Florida Statute	es, the above named corpo zed by the corporation's boa s.	ration submits this statement for the pur rd of directors. Thereby accept the appo	pose of changing its registered bintment as registered agent. I	am
SIGNATURE	a valure, typed or printed name of reg			Die Registerer Agentisch whome regime	ADDITIONS/CHANGES TO OFFI		<u></u>
12. *	D	CERS AND DIRECTO	DELETE	1 1 TILE	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN T	{
NAME STREET ADDRESS	EDMONDSON, LOUIS 351 6TH AVE. WEST	6 E		1.2 NAME 1.3 STREET ADDRESS			034
CITY+S1+ZIP	BRADENTON FL 342	05		1.4 C/TY - ST- Z/P			R
TITLE NAME			DEL E IE	2 1 TITLE 2 2 NAME		🛄 Change 📋 Ad	dition O
STREET ADDRESS				2.3 STREET ADDRESS			
CITY - ST - ZIP TITLE				2.4 CITY-ST-ZiP 3.1 TRLE	.,,	Change 🗋 Ad	dition
NAME				3 2 NAME			
STREET ADORESS				3.3 STREET ADDRESS 3.4 CITY - ST - ZiP			
CHTY - ST - ZIF THTLE	_		DELETE	4 1 TIFLE		Change 🗌 Ad	dition
NAME				4.2 NAME 4.3 STREET ADDRESS			
STREET ADDRESS GITY-ST-ZIP				4.4 CITY - ST - ZP	· · · · · · · · · · · · · · · · · · ·		
UTLE NAME			DEI ETE	5-110°LF 5-2 NAME	5000017 03/19/9601 ***200.00		dition
NAME STREET ADDRESS				5 3 STREET ADDRESS	***200.00	040008	
CITY-ST-ZIP TITL E			DELETE	5 4 CITY - SY - ZIP 6 1 TITLE		Change Ad	dition
NAME				6.2 NAME			
STREET ADDRESS				6 3 STREET ADDRESS			
CITY-SI-ZIP 14. I do hereby codify that	certify that the information	supplied with this film	g is voluntarily fur	64 CEY - ST-ZP nished and does not qualify nual record is true and accurs	for the exemption stated in Section 119,	07(3)(k), Florida Statutes. I furt	her
oath; that I appears in	an an officer or director of Block 12 or Block 127 cha	the corporation or he nged, or cran articl	a receiver or trust ment with an acc	empowered to explute th	ate and that my signature shall have the is report as required by Chapter 607, Flo	orida Statutes; and that my na	me
SIGNAT				ER OR DIRECTOR	3/4/94	Daytinic Prione 1	