

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. M. Strain
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000018033 (7)

1. Corporation Name

AEROLEASE 46099, INC.



Principal Place of Business

6303 BLUE LAGOON DR.
SUITE 380, MIAMI INTERNATIONAL AIRPORT
MIAMI FL 33126

Mailing Address

6303 BLUE LAGOON DR.
SUITE 380, MIAMI INTERNATIONAL AIRPORT
MIAMI FL 33126

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

CORPORATION INFORMATION SERVICES, INC.
1201 HAYS ST.
TALLAHASSEE FL 32301

3. Date of Incorporation (Required)

03/06/1995

3a. Date of Last Report

4. FET Number

65-0565787

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 195.032,
Florida Statutes.

☒

Yes

☐

No

10. Name and Address of New Registered Agent

81 Name

82 Street Address, P.O. Box Number, If Not Applicable

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.01(2)(b) and 607.12(1)(b), Florida Statutes, the above named corporation solemnly declares, for the purpose of changing its registered office or registered agent, or both, in the State of Florida, that coverage was authorized by the corporation's board of directors. Thereby, I accept the appointment as registered agent. I am familiar with, and I accept the obligations of, Sections 607.01(2)(b) and 607.12(1)(b), Florida Statutes.

SIGNATURE

Signature of Agent or Director

Signature of Agent or Director

OR

12. OFFICERS AND DIRECTORS

1. TITLE	PD	☐ DELETE
2. NAME	GOLDBERG, MICHAEL A	
3. STREET ADDRESS	6303 BLUE LAGOON DR., SUITE 380	
4. CITY, ST, ZIP	MIAMI FL 33126	
5. TITLE	VD	☐ DELETE
6. NAME	WEISEN, ART	
7. STREET ADDRESS	6303 BLUE LAGOON DR., SUITE 380	
8. CITY, ST, ZIP	MIAMI FL 33126	
9. TITLE	S	☐ DELETE
10. NAME	GOLDBERG, ANA	
11. STREET ADDRESS	6303 BLUE LAGOON DR., SUITE 380	
12. CITY, ST, ZIP	MIAMI FL 33126	
13. TITLE		☐ DELETE
14. NAME		
15. STREET ADDRESS		
16. CITY, ST, ZIP		
17. TITLE		☐ DELETE
18. NAME		
19. STREET ADDRESS		
20. CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	☐ Change ☐ Addition
5. TITLE	
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	☐ Change ☐ Addition
9. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	☐ Change ☐ Addition
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	☐ Change ☐ Addition
17. TITLE	
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	☐ Change ☐ Addition

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-03/26/96--01111--014
***200.00

SIGNATURE:

Art Weisen

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ART WEISEN 1-31-96 305-264-8900

CR2E034 (12/95)