

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

PROFIT
CORPORATION
ANNUAL REPORT
1996

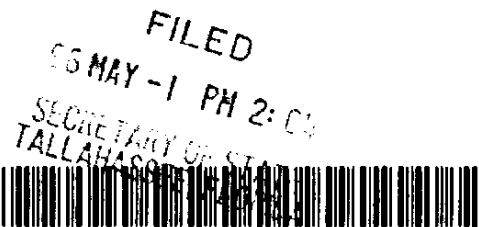


FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000024453 (9)

1. Corporation Name

APOLLO AIR LEASING CORP.



Principal Place of Business

150 W. FLAGLER ST.
MUSEUM TOWER, SUITE 2701
MIAMI FL 33130

Mailing Address

150 W. FLAGLER ST.
MUSEUM TOWER, SUITE 2701
MIAMI FL 33130

2. Principal Place of Business

2a. Mailing Address

21 4955 S.W. 75th Avenue

26 4955 S.W. 75th Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Miami FL

28 Miami, FL

Zip

Zip

Country

Country

24 33155

25 USA

29 33155

30 USA

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

03/27/1995

3a. Date of Last Report

4. FEI Number

☒ 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. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

BEFELER, GEORGE ESO
150 W. FLAGLER ST.
MUSEUM TOWER, SUITE 2701
MIAMI FL 33130

81 Name Geoffrey M. Wayne, P.A.

82 Street Address (P.O. Box Number is Not Acceptable)
Brickell Bay Office Tower

83 1001 South Bayshore Drive Suite 2702

84 City Miami

FL

85 Zip Code 33131-4900

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Sections 607.0502, Florida Statutes.

SIGNATURE

Geoffrey M. Wayne

Print, Type and Agent's name as registered agent

4/30/96

Date

12. OFFICERS AND DIRECTORS

TITLE D
NAME BEFELER, GEORGE ESO
STREET ADDRESS 150 W. FLAGLER ST., SUITE 150
CITY-ST-ZIP MIAMI FL 33130 ☐ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE D ☒ Change ☐ Addition
12 NAME Maria Elena Botero
13 STREET ADDRESS 4955 S.W. 75th Avenue
14 CITY-ST-ZIP Miami FL 33155

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS

24 CITY-ST-ZIP ☐ Change ☐ Addition
31 TITLE
32 NAME
33 STREET ADDRESS

34 CITY-ST-ZIP ☐ Change ☐ Addition
41 TITLE
42 NAME
43 STREET ADDRESS

44 CITY-ST-ZIP ☐ Change ☐ Addition
51 TITLE
52 NAME
53 STREET ADDRESS

54 CITY-ST-ZIP ☐ Change ☐ Addition
61 TITLE
62 NAME
63 STREET ADDRESS

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in 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 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 or changed, or on an attachment, with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Maria E. Botero 4/1/96 (305) 381-8108

CR2E034 (12/95)