

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**May 15, 1999 8:00 am**  
**Secretary of State**

05-15-1999 90007 019 \*\*\*150.00

DOCUMENT # P95000046387 (3)

1. Corporation Name

BOOMERANG AVIATION CORP.

Principal Place of Business

6175 N.W. 153rd St.  
Suite 215  
Miami Lakes, FL 33014  
US

Mailing Address

6175 N.W. 153rd St.  
Suite 215  
Miami Lakes, FL 33014  
US

2. Principal Place of Business

21 6175 N.W. 153rd St.  
Suite, Apt. #, etc.

22 Suite 312

City & State

23 Miami Lakes, FL

Zip Country

24 33014 25 US

2a. Mailing Address

26 6175 N.W. 153rd St.  
Suite, Apt. #, etc.

27 Suite 312

City & State

28 Miami Lakes, FL

Zip Country

29 33014 30 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/09/1995

4. FEI Number

65-0593956

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 owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

Evans, Sheldon P.A.

6175 N.W. 153rd Street

Suite 215

Miami Lakes, FL 33014

10. Name and Address of New Registered Agent

81 Name Evans, Sheldon P.A.

82 Street Address (P.O. Box Number is Not Acceptable)  
6175 N.W. 153rd Street

83 Suite 312

84 City Miami Lakes, FL 85 Zip Code 33014

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, Section 607.0505, Florida Statutes.

SIGNATURE *Sheldon Evans* SHELDON EVANS, Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/27/99  
DATE

12. OFFICERS AND DIRECTORS

TITLE DPT ☐ DELETE  
NAME Thomson, John D.  
STREET ADDRESS 6175 N.W. 153rd St., Ste. 215  
CITY-ST-ZIP Miami Lakes, FL 33014

TITLE DVS ☐ DELETE  
NAME Thomson, Paula G  
STREET ADDRESS 6175 N.W. 153rd St., Ste. 215  
CITY-ST-ZIP Miami Lakes, FL 33014

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

1.1 TITLE DPT ☒ Change ☐ Addition  
1.2 NAME Thomson, John D  
1.3 STREET ADDRESS 6175 N.W. 153rd St., Ste. 312  
1.4 CITY-ST-ZIP Miami Lakes, FL 33014

2.1 TITLE DVS ☒ Change ☐ Addition  
2.2 NAME Thomson, Paula G  
2.3 STREET ADDRESS 6175 N.W. 153rd St., Ste. 312  
2.4 CITY-ST-ZIP Miami Lakes, FL 33014

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Paula G. Thomson*  
PAULA G. THOMSON, SECRETARY

4/27/99  
Date

Daytime Phone #

CR2E034 (11/98)