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

DOCUMENT # P95000055369

1. Corporation Name

AIVIEAGU	I - AIVIERIUAN EARUR I UU:	, INC.			•			
		Mailing Address				 	ENEL BUILD BUILD HULL	0211 0 2021 1991
Principal Place		Mailing Address						
2441 NW 93RD AVENUE 2441 NW 93RD AVENUE								
SUITE 106 SUITE 106 MIAMI FL 33172 MIAMI FL 33172					DO N	OT WRITE IN T	HIS SPACE	
US US					3. Date Incorporated or	Qualifed	_	
					07/14/1995		_	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number		Ap	plied For
21 26					65-0599917	65-0599917 Not App		t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certifcate of Status D		esired 🔣	\$8.75	
27					5. Certificate of Status D	esileo Es	Fee Re	quired
City & State	e	City & State	City & State			nancing	\$5.00	May Be
28					Trust Fund Contributi	on 🖳	Added t	o Fees
Zip Country Zip			Country	5				
24	25	29 30	<u> </u>		Personal Property Ta			™
	g. Name and Address of Current	Registered Agent			10. Name and Address	of New Register	red Agent	
			81	Name				- 1
DOS SANTOS, ERIVAN E			82	Street	Address (P.O. Box Number is No	t Acceptable)		
7601 EAST TREASURE DRIVE, #2421				<u> </u>	<u> </u>			
NORTH BAY VILLAGE			83					
MIAMI BEACH FL 33141			84	City		···	85 Zip (Code
			1] '			- L <u> </u>	
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statutes,	the above	e-named	corporation submits this stateme	nt for the purpose	e of changing its	registered
office or re	egistered agent, or both, in the State of m familiar with, and accept the obligat	ions of, Section 607.0505, Florida	Statutes	the corpo	oration's board of directors. There	by accept the at	pointinent do 10	9.3.0.00
SIGNATURE					•			
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Reg	istered Ager	nt signature r	equired when reinstating)	DATE		
12.	OFFICERS AN		13.		ADDITIONS/CHANGE	S TO OFFICERS	AND DIRECTO Change	RS IN 12 Addition
TITLE	P	☐ DELETÉ	1.1 TITLE		PRESIDENT	in less i		C) Audition
NAME	DOS SANTOS, ERIVAN E		1.2 NAME		DOS SANTOS E			اً ،
STREET ADDRESS	2100 CALPRO DII. #4		1,3 STREE	TADDRESS	1601 E. IREA	URE DE	J 270	9
CITY-ST-ZIP			1.4 CITY-S	T-ZIP	NORTH DAY VI	unot, 1	<u>~ 531</u>	4
ΠΓLE	VP	DELETE 2.1 T			<u>'</u>	,	Change	` ' [] Addition
NAME	SMITH, JOHN E		2.2 NAME		12 -Cions	A		
STREET ADDRESS	1261 VARGAS DR.		2.3 STREE	TADDRESS	1 KCS/6N			
CITY-ST-ZIP	SAN JOSE CA		2.4 CITY-5	ST-ZIP	, , , , , , , , , , , , , , , , , , , ,			
TITLE		☐ DELETE	3.1 TITLE		•		Change	Addition
NAME			3.2 NAME		* * * * * * * * * * * * * * * * * * * *			ļ
STREET ADORESS			3.3 STREE	TADDRESS				ļ
CITY-ST-ZIP	<u> </u>		3.4. CITY-5	ST-ZIP_				
πιε		□ DELETE	4.1 TITLE				Change	☐ Addition
NAME		3 • • •	4.2 NAME					
STREET ADDRESS		Control of the contro	4.3 STREE	T ADDRESS				
CITY-ST-ZIP		N	4.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	5.1 TITLE		_AL . : . 1	1	☐ Change	☐ Addition
NAME			5.2 NAME			.*	•	.
STREET ADDRESS			5.3 STREE	T ADDRESS	l and the		•	l I
CITY-ST-ZIP		•	5.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	6.1 TITLE				☐ Change	☐ Addition
NAME '	•		6.2 NAME					
STREET ADDRESS			6.3 STREE	TADORESS	, , -			ĺ

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 of the receiver of 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.

6.4 CITY ST-ZIP

SIGNATURE:

FILED May 01, 1999 8:00 am Secretary of State

05-01-1999 90069 009 ***158.75