PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000087627

EVERY DAY AIR, INC.

Principal Place of Business

Mailing Address

1530 NW 23RD AVELVD STE 502 FT LAUDERDALE FL 33311 1530 NW 23RD AVELVD STE 502 FT LAUDERDALE FL 33311

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90029 035 ***150.00



DO NOT WRITE IN THIS SPACE

2. Date Incorporated or Qualifod

					11/15/199				
Principal Place of Business 2a. Mailing Address					4. FEI Number	/5		Applied For	
	8851 NW 78th St. 26 8851 NW 78			St.	65-06244	83	· 14	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.							\$8.75	Additional	
22 199 27 199				5. Certifcate of Statu		Status Desired	Fee	Required	
City & State City & State					6. Election Can	npaign Financing	\$5.0	0 мау Ве	
Tamarac, FL 28 Tamarac,					Trust Fund (Contribution	Adde	d to Fees	
Zip				try	8. This corpora	tion owes the current yea	ar Intangible		
3332	33321 25 USA 29 33321 3			USA Personal Proper			☐ Yes	□No	
1=	9. Name and Address of Curre	ent Registered Agent			10. Name and	Address of New Registe	red Agent		
				31 Name					
SCHNITZER, GERALD S				82 Street Address (P.O. Box Number is Not Acceptable)					
2455 E SUNRISE BLVD				Street Address (F.O. Box Halliber is Not Accoptable)					
SUITE 502				33					
FT LAUDERDALE FL 33304									
			1	Gity			FL S5 Zi	p Code	
11 Durement	to the provisions of Sections 607.05	i02 and 607 1508. Florida Statute	s the abo	ove-named co	propretion submits this	statement for the purpos	e of changing	its registered	
office or r	egistered agent or both in the State	e of Florida. Such change was au	itnonzea i	by the corpora	ation's board of directo	ors. I hereby accept the a	ppointment as	registered	
agent. I a	m familiar with, and accept the oblig	jations of, Section 607.0505, Flori	iga Statut	es.		•			
SIGNATURE	Signature, typed or printed name of registered as	NOTE:	Conjetored A	gent elonature reg	uired when reinstating) ,	DAT	É.		
12.		AND DIRECTORS	13.	gent agnature req		CHANGES TO OFFICER		TORS IN 12	
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NAME	SETTLE, DAVID A				SETTLE,		100		
STREET ADDRESS				EET ADDRESS		78th St. #1	199	•	
CITY-ST-ZIP	FT LAUDERDALE FL 33311		_	/-ST-ZIP	Tamarac,	FL 33321	Chang	e Addition	
TITLE	☐ DELETE		2,1 TITL				Chang	e	
NAME				E	-				
"STREET ADDRESS	TREET ADDRESS			EET ADDRESS	*				
CITY-ST-ZIP			2. 4 CIT	Y-ST-ZIP				- D Addition	
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NAME			3.2 NAM	IE					
STREET ADDRESS			3.3 STR	EET ADDRESS					
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			5.4 C/T	(-ST-ZIP					
CITY-ST-ZIP		☐ DELETE	6.1 TITL				☐ Chang	e Addition	
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14. I hereby	certify that the information supplied	with this filing does not qualify for	the exen	iption stated i	iu 26ctiou 118.0\(3)(t)	, Florida Statutes. I Tunne	er Certify trief th	e illificiation	

4. 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 informatio 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

//12/99 Date 954-684-8465 Daytime Phone #

:R2E034 (11/98)