FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 PROFIT FLORIDA DEPARTMENT OF STATE FILED CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 98 APR 29 PM 3: 16 P96000000444 (5) DOCUMENT # SECRETARY OF STATE TALLAHASSEE, FLORIDA HANGAR OPERATIONS COMPANY, INC. Mailing Address Principal Place of Business 450 E. LAS OLAS BLVD 450 E. LAS OLAS BLVD **STE 1500** STE 1500 DO NOT WRITE IN THIS SPACE FORT LAUDERDALE FL 33301 FORT LAUDERDALE FL 33301 3. Date Incorporated or Qualified 01/03/1996 4. FFI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0639479 Not Applicable 26 Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Г Trust Fund Contribution Added to Fees 23 28 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes \(\sigma\) No Country Zip 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name AMEICAN INFORMATION SERVICES, INC. ONE S.E. THIRD AVENUE Street Address (P.O. Box Number is Not Acceptable) 27TH FLOOR 83 MIAM! FL 33131 84 City Zip Code 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** Signature, typed or ponted name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12, Addition DELETE 11 TITLE TITLE RUCHED, RICHARD C NAME 1.2 NAME -05/06/98--01017---013 450 E. LAS OLAS BLVD., 15 FLOOR STREET ADDRESS 1.3 STREET ADDRESS \*\*\*\*150.00 \*\*\*\*150.00 FT. LAUDERDALE FL 33301 1.4 CITY - ST - ZIP CITY-ST-ZIP ٧٢ Change Addition DELETE 2.1 TITLE TITLE BRANDON CRIS V BRANDEN, CRIS V 2.2 NAME NAME 450 E. LAS OLAS BLVD., 15 FLOOR 2.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 33301 2. 4 CITY - \$1 - 7IP CITY-ST-ZIP Change Addition **VPS** DELETE 3.1 1116.8 TITLE PIERCE, WILLIAM M 32 NAME NAME 450 E. LAS OLAS BLVD., 15 FLOOR 3.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 33301 3.4. CITY - ST-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TiTLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME

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 of supplymental 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 achment with an address. Block 12 or Block 13 if char

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

61 TITLE

6.2 NAME 6.3 STREET ADDRESS

STREET ADDRESS

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CITY-ST-ZIP

TITLE NAME

V DOMAGAA

DELETE

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954-627-0200

Change

Addition