File now: Filing fee After May 1ST is \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000018400 (7)

AIRPORT ONE MESSENGER SERVICE CORP.

| Principal Place of Business |
|-----------------------------|
| 7450 NW 8TH STREET |
| MIAMI FL 33128 |

Sulte, Apt. #, etc.

City & State

2. Principal Place of Business

Mailing Address

P.O. BOX 527850 MIAMI FL 33152

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

FILED May 11 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

Not Applicable

3. Date Incorporated or Qualified

02/28/1996

65-0655291

5. Certificate of Status Desired

4. FEI Number

| City & State City & St | | | State | | 6. Election Campaign Financing | \$5.00 | May Be |
|------------------------|--|---|--------------------|------------------|--|---------------------------------------|---|
| 23 | | 28 | | | Trust Fund Contribution | | to Fees |
| Zip | Country | Zip | Count | ry | 8. This corporation owes or has p | aid the current year In | tangible |
| 24 | 25 29 30 | | 30 | | Personal Properly Tax due June 30. 🔲 Yes 🔲 No | | |
| | 9. Name and Address of C | urrent Registered Agent | | 41 | 10. Name and Address of New R | egistered Agent | |
| MILETIC, ELLA | | | | 1 Name | MILETIC, ELLA | | |
| 7392 NW 8 ST. | | | | 2 Street A | Address (P.O. Box Number is Not Accepte 7450 NW 8 STREET | able) | |
| MU | AMI FL 33126 | | <u></u> | | 7450 NW 8 STREET | · · · · · · · · · · · · · · · · · · · | |
| | | | 8: | 3 | | | |
| | | | 8 | 4 City | | 85 Zip | Code - |
| | | | | | MIAMI, FL | | 33126 |
| 11. Pursuant | to the provisions of Sections 60 registered arrest, or both, in the | 7.0502 and 607.1508, Florida : State of Florida, Such change | Statutes, the abo | ve-named o | corporation submits this statement for the oration's board of directors. I hereby acce | purpose of changing it | ts registered |
| agent. I a | m familiar with, and accept the | obligations of, Section 607.050 | 05, Florida Statut | DS. | oration a board of aircolors. Thereby door | spi the appointment as | rogistored |
| SIGNATURE | | | | | | | |
| | Signature, typed or printed name of registe | | | gent signature r | required when reinstating) | DATE | |
| 12. | OFFICER DPST | IS AND DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFF | | |
| TITLE | MILETIC, ELLA | ריין הנונו | | | | L Change | ☐ Addition |
| NAME | 7392 NW 8 ST. | | 1.2 NAM | | MILETIC, ELLA | | |
| STREET ADDRESS | MIAMI FL 33126 | | | E1 ADDRESS | 7450 NW 8 Street | | |
| CITY-ST-ZIP | | - Drutt | 1.4 CITY- | | Miami, FL 33126 | T-1 01 | Addition |
| TITLE | S NEIDELO NEO | ☐ DELET | 1 | 1 | | Change | Addition |
| NAME | MILETIC, MICI | | 2.2 NAM | 1 | | | |
| STREET ADDRESS | 7450 NW 8 St | | | E1 ADDRESS | | | |
| CITY-ST-ZIP | Miami, FL 3 | 3126 | 2. 4 CITY | | | | |
| TITLE | | ☐ DELET | | | | L. Change | ☐ Addition |
| NAME | | | 3.2 NAM | | | | |
| STREET ADDRESS | - | | | E1 ADDRESS | | | |
| CITY-ST-ZIP | | T reter | 3.4. CITY | | | 1 01 | 1 |
| TITLE | | DELET | | ŀ | | Change | ☐ Addition |
| NAME | | | 4. 2 NAM | | | | |
| STREET ADORESS | | | 1 | ET ADDRESS | | | } |
| CITY-ST-ZIP | | - Present | 4.4 City- | | | 110 | A a distant |
| TITLE | | DELET | V | | | ☐ Change | ☐ Addition |
| NAME | | | 5.2 NAME | 1 | | | |
| STREET ADDRESS | | | | E1 ADDRESS | | | |
| CITY-ST-ZIP | · · · · · · · · · · · · · · · · · · · | | 54 CITY | | | | |
| TITLE | | | | i | | Change | ☐ Addition |
| NAME | li | | 6.2 NAME | · . | | | |
| STREET ADDRESS | | | | ET ADDRESS | • | | |
| CITY-ST-ZIP | | Control Market Control | 6.4 CITY | ST-ZIP | 11. 0 11. 440 ONIO(1) 5 | 17 11 11 11 11 11 | |
| indicated | on this annual report or suppler | mental annual réport is true an | d accurate and t | hal my sign | d in Section 119.07(3)(i), Florida Statutes. nature shall have the same legal effect as | if made under oath; the | attam an i |
| officer or | director of the corporation or the or Block 13 if changed, or on a | e receiver or trustee empowere | ed to execute this | s report as i | required by Chapter 607, Florida Statutes | ; and that my name ap | pears in |
| DIOON IZ | or brown tail changed, or on al | n agaginnent with an address. | / | ^ | . 1 | | |