1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9600034916

1. Corporation Name

## FILED Jan 27, 1999 8:00am Secretary of State

01-27-1999 90010 049 \*\*\*150.00

AIR ALLIA	ANCE, INC.							
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Principal Place	of Business		iling Address					•
937 SPOONBILL CIR FT LAUDERDALE FL 33326			937 SPOONBILL CIR FT LAUDERDALE FL 33326					
FI LAUDERDALI	: FL 33326		ENGINEENCE TO GOOD	,		DO NOT WRITE IN	THIS SPACE	
			•			3. Date Incorporated or Qualifed		i
						04/18/1996		pplied For
2. Principal Pla	ace of Business	2a.	Mailing Address			4. FEI Number 65-0671762	<u> </u>	ot Applicable
21		26	Suite, Apt. #, etc		·			Additional
Suite, Apt. i	#, etc	27	Suite, Apt. #, etc	<u></u>		5. Certificate of Status Desired	Fee Re	equired
22 City & State		21	City & State	: <u>-</u> _	<del>;</del> ;	6. Election Campaign Financing	\$5.00	May Be
City & State	•	28	<b>4, 2 2 </b>			Trust Fund Contribution		to Fees
Zip	Country		Zip	Country	<i>·</i>	8. This corporation owes the current y	ear Intangible	п.,
24	25	29		30		Personal Property Tax.	Yes	□No
	9. Name and Address of Curren				T	10. Name and Address of New Regi	sterea Agent	· · · · · · · · · · · · · · · · · · ·
	DE MONTE L			81	Name		,	• • :
	RE, MICHAEL L		•	82	Street Add	ress (P.O. Box Number is Not Acceptable)	H	Ì
901	SPOONBILL CIR	*:		83	.—-	** ** ** ** ** ** ** ** ** ** ** ** **	n. (noga datalaria) Britani da kirin da karan	181. 2.2.181
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		•		84	City		FL 85 Zip	Code *
		5.11			<u> </u>	peration submits this statement for the DUI	pose of changing its	s registered
COLUMN TOWN	9.55	00	07 4500 Elorido Statu	tee the show	⁄a•named co⊓			
11. Pursuant	to the provisions of Sections 607.050	02 and 6 of Florid	07.1508, Florida Statu la. Such change was a	ites, the abov authorized by	/e-named corporation	tion's board of directors. I hereby accept the	e appointment as re	egistered
11. Pursuant office or r agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	02 and 6 e of Florid ations of	07.1508, Florida Statu da. Such change was a Section 607.0505, Flo	ites, the above authorized by orida Statutes	re-named corp the corporations.	ion's board of directors. I hereby accept th	e appointment as re	egistered
11. Pursuant office or ragent. I a						red when reinstating)	DATE	
SIGNATURE	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligation of the state of	ent and title	if applicable. (NOT				DATE ERS AND DIRECT	ORS IN 12
	Signature, typed or printed name of registered age	ent and title	if applicable. (NOT	E: Registered Age		red when reinstating)	DATE	
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14. I hereby certify that the information supplied with this filling 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

GN TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/2/99 Date 954-384-6526 Daytime Phone #

**2011/1/108**