## 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 # P96000036683 (6)

PARADISE HELICOPTERS INC

**FILED** May 04 1998 8:00am Secretary of State

יאואט	MOL TILLI	OOF ILIIO, INO.						A MARINARI ING KAMIN ANIM ARIM ARIM ARIM ARIM ANIKA AKKAR AKIRA KAMIN ANIM ARIM
Principal Place of Business			Admilian	Mailine Addison				
• •				Mailing Address				
15728 FRONT BEACH ROAD PANAMA CITY BEACH FL 32413				15726 FRONT BEACH ROAD PANAMA CITY BEACH FL 32413				DO NOT WRITE IN THIS SPACE
								3. Date Incorporated or Qualified
								04/26/1996
2. Principal F	Place of Busin	7088	2a. Ma	2a. Mailing Address				4. FEI Number Applied For
21			26	26				59-3382649 Not Applicable
Sulte, Apt.	#, etc.	***************************************		Suite, Apt. #, etc.				S8 75 Additional
22			27					5. Certificate of Status Desired Fee Required
City & Sta	te		Cit	City & State				8. Election Campaign Financing \$5.00 May Be
23			28					Trust Fund Contribution Added to Fees
Zip		Country	├─-\ ├─-\			ntry		8. This corporation owes or has paid the current year Intangible
24		25	29		30			Personal Property Tax due June 30.  Yes No
		and Address of Cur	rent Registere	d Agent		1	•	10. Name and Address of New Registered Agent
	HITTON, JEI					81	Name	
565 HÄRRISON AVENUE PANAMA CITY FL 32401					ļ	82	Street A	Address (P.O. Box Number is Not Acceptable)
		, , , , , , , , , , , , , , , , , , , ,				83		
						84	City	<b>■ 85</b> Zip Code
	· · · · · · · · · · · · · · · · · · ·							<b>FL</b>
11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statules, 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.	Signature, lyped	or printed name of registered	agent and the it app	olicable (NO	F Registered	Ago	nt signature ri	required when reinstating) DATE
12.		OFFICERS	AND DIRECTO		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D			☐ DELETE	1.1 10	LE		Change Addition
NAME		K, MICHAEL L	_		1.2 NA	ME		
STREET ADDRESS		RONT BEACH ROA					ADDRESS	
CITY-ST-ZIP							I - ZIP	
TITLE	D			DELETE	2.1 117	ιE		☐ Change ☐ Addition
NAME		, MICHELE A	_		2.2 NA	ME	1	
STREET ADDRESS		RONT BEACH ROA			23ST	REET	ADDRESS	
CITY-ST-ZIP	PANAM	A CITY BEACH FL	32413		2 4 0		1 - ZIP	
TITLE				☐ DELETE	3.1 TIT		1	☐ Change ☐ Addition
NAME					3.2 NA			
STREET ADDRESS					3.3 ST	REFT	ADDRESS	
CITY-ST-ZIP	ļ		<del></del>	00,555	3.4 C	_	T-ZIP	
TITLE				☐ DELETE	4.1 111		1	L Change  Addition
NAME					4. 2 N/			
STREET ADDRESS							ADDRESS	
CITY-ST-ZIP		<del></del>		NELETE.	4.4 01		- ZIP	
TITLE	1			☐ DELETE	5.1 TIT			Change Addition
NAME					5.2 NA		1	
STREET ADDRESS	1						ADDRESS	
CITY-ST-ZIP	<del> </del>			DELETE	5.4 CIT		r-zip	Ohanes I delite
TITLE				C) percie	6.1 TIT			Change Addition
NAME	l				62 NA			
STREET ADDRESS							ADDRESS	
CITY-ST-ZIP	<u> </u>				6.4 CI	Y-\$1	I - ZIP	

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 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.

(850)270-2010