

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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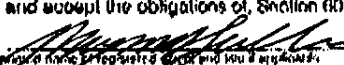
SECRETARY OF STATE
TALLAHASSEE FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # P96000052329 (5) Corporation Name TED'S AVIATION, INC.		

Principal Place of Business 601 BRICKELL KEY DRIVE SUITE 600 MIAMI FL 33131	Mailing Address 601 BRICKELL KEY DRIVE SUITE 600 MIAMI FL 33131-3651
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2. Principal Place of Business 625 Harbor Circle Suite, Apt. #, etc.		2a. Mailing Address 625 Harbor Circle Suite, Apt. #, etc.		3. Date Incorporated or Qualified 06/18/1996	3a. Date of Last Report 06/18/1996
2b. City & State Key Biscayne, FLORIDA		2c. City & State Key Biscayne, FLORIDA		4. FLE Number 65-0714664	Applied For Not Applicable
2d. Zip 33149		2e. Country USA		5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
2f. Name and Address of Current Registered Agent DOWNS, JOSEPH W III 601 BRICKELL KEY DRIVE SUITE 600 MIAMI FL 33131		2g. Name and Address of New Registered Agent Raymond P. Sullivan 625 Harbor Circle		6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
2h. Name and Address of Current Registered Agent DOWNS, JOSEPH W III 601 BRICKELL KEY DRIVE SUITE 600 MIAMI FL 33131		2i. Name and Address of New Registered Agent Raymond P. Sullivan 625 Harbor Circle		6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

11. Pursuant to the provisions of Sections 607.0502 and 607.1501, Florida Statutes, the undersigned 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.	12. Name and Address of Current Registered Agent DOWNS, JOSEPH W III 601 BRICKELL KEY DRIVE SUITE 600 MIAMI FL 33131	13. Name and Address of New Registered Agent Raymond P. Sullivan 625 Harbor Circle
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SIGNATURE 	DATE 4/29/97
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12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PRESIDENT	☐ DELETE	1.1 TITLE PRESIDENT	☐ Change ☐ Addition
NAME Raymond P. Sullivan		1.2 NAME Raymond P. Sullivan	
STREET ADDRESS 15405 NW 7 AVE		1.3 STREET ADDRESS 15405 NW 7 AVE	
CITY-ST-ZIP MIAMI FL 33169		1.4 CITY-ST-ZIP MIAMI FL 33169	
TITLE PRESIDENT	☐ DELETE	2.1 TITLE PRESIDENT	☐ Change ☐ Addition
NAME Raymond P. Sullivan		2.2 NAME Raymond P. Sullivan	
STREET ADDRESS 15405 NW 7 AVE		2.3 STREET ADDRESS 15405 NW 7 AVE	
CITY-ST-ZIP MIAMI FL 33169		2.4 CITY-ST-ZIP MIAMI FL 33169	
TITLE PRESIDENT	☐ DELETE	3.1 TITLE PRESIDENT	☐ Change ☐ Addition
NAME Raymond P. Sullivan		3.2 NAME Raymond P. Sullivan	
STREET ADDRESS 15405 NW 7 AVE		3.3 STREET ADDRESS 15405 NW 7 AVE	
CITY-ST-ZIP MIAMI FL 33169		3.4 CITY-ST-ZIP MIAMI FL 33169	
TITLE PRESIDENT	☐ DELETE	4.1 TITLE PRESIDENT	☐ Change ☐ Addition
NAME Raymond P. Sullivan		4.2 NAME Raymond P. Sullivan	
STREET ADDRESS 15405 NW 7 AVE		4.3 STREET ADDRESS 15405 NW 7 AVE	
CITY-ST-ZIP MIAMI FL 33169		4.4 CITY-ST-ZIP MIAMI FL 33169	
TITLE PRESIDENT	☐ DELETE	5.1 TITLE PRESIDENT	☐ Change ☐ Addition
NAME Raymond P. Sullivan		5.2 NAME Raymond P. Sullivan	
STREET ADDRESS 15405 NW 7 AVE		5.3 STREET ADDRESS 15405 NW 7 AVE	
CITY-ST-ZIP MIAMI FL 33169		5.4 CITY-ST-ZIP MIAMI FL 33169	
TITLE PRESIDENT	☐ DELETE	6.1 TITLE PRESIDENT	☐ Change ☐ Addition
NAME Raymond P. Sullivan		6.2 NAME Raymond P. Sullivan	
STREET ADDRESS 15405 NW 7 AVE		6.3 STREET ADDRESS 15405 NW 7 AVE	
CITY-ST-ZIP MIAMI FL 33169		6.4 CITY-ST-ZIP MIAMI FL 33169	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.	DATE 4/29/97
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