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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

1998 DIVISION OF CORPORATIONS						Secretary of State					
DOCUMENT # P9600053422 (7) SUNSHINE AVIATION, INC.											
Principal Place of Business Mailing Address							MITTE BOSEN OF 114 &			418 (181 (181	
1001 AVENIDA DEL CIRCO 1001 AVENIDA DEL CIRCO											
VENICE FL 34285 VENICE FL 34285						DO NOT WRITE IN THIS SPACE					
ļ					<u> </u>	3. Date Incorporated		E IN THIS S	SPACE		
						06/21/1996	i Oi Quailled				
2. Principal P	Principal Place of Business 2a. Mailing Address					4. FEI Number			I A	pplied For	
21	26					65-0678713	 		<del></del>	ot Applicable	
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.									Additional	
22 27						5. Certificate of Stati	us Desired	_⊔	Fee R	equired	
City & State	e City & State				ſ	6. Election Campaig	h Financing		\$5.00	May Be	
23	28					Trust Fund Contri	pution		Added	to Fees	
Zip	Country					8. This corporation owes or has paid the current year Intangible					
24	9. Name and Address of Current		30			Personal Property  10. Name and Addre				☐ No	
DO.	<del></del>	negistered Ageitt	81	Name		IV. Italia and Addit	DS OF REIT IN	-Bistelea 1	- Gent		
BOONE, STEPHEN K						·····	ļ				
1001 AVENIDA DEL CIRCO VENICE FL 34285				Street A	ddress	(P.O. Box Number is	Not Accepta	ple)			
YEI	MICE FL 34203		83				!			<del></del>	
						······································			<del></del>	<u> </u>	
	84	City			 	FL	85 Zip	Code			
11. Pursuant	to the provisions of Sections 607,0502	and 607.1508, Florida Statute	s, the abov	e-named c	corpora	ation submits this state	ment for the		changing i	ts registered	
office or r	to the provisions of Sections 607,0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida, Such change was a ions of Section 607 0505. Flo	uthorized b rida Statute	y the corpo	oration	's board of directors.	hereby acce	pt the appo	ointment as	registered	
SIGNATURE			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•							
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE	. Registered Ag	ent signature re	equired v	then reinstating)		DATE			
12.	OFFICERS AND DIRECTORS					ADDITIONS/CHAN	GES TO OFFI	CERS AND			
TITLE	PSTD	☐ DELETE	1.1 TITLE	1					L Change	Addition	
NAME	RENKENBERGER, NORBERT		1.2 NAME								
STREET ADDRESS	1001 AVENIDA DEL CIRCO		1.3 STREET ADDRESS				1				
CMY-ST-ZIP TITLE	VENICE FL 34285			1.4 CITY-ST-ZIP 2.1 TITLE			7	<del></del>	Change	Addition	
NAME							!		T" olianăc	Li Addition	
STREET ADDRESS			2.2 NAME	ADDRESS						İ	
CITY-ST-ZIP			2.4 CITY -	J						- 1	
TITLE				\$1-41					Change	Addition	
NAME			3.1 TITLE 3.2 NAME								
STREET ADDRESS			3.3 STREET	ADDRESS							
GITY-ST-ZIP			3.4. CITY -								
TITLE		DELETE	4.1 TITLE						Change	Addition	
NAME			4. 2 NAME							1	
STREET ADDRESS			4.3 STREET	ADDRESS						1	
CITY - ST - ZIP			4.4 CiTY - 5	T-ZIP							
TITLE		☐ DELETE	5.1 TITLE		_				Change	Addition	
NAME			5.2 NAME	]							
STREET ADDRESS			5.3 STREET	ADDRESS						-	
CITY - ST - ZIP			5.4 CITY - S	T-ZIP					-		
TITLE		☐ DELETE	6.1 TITLE			:			☐ Change	Addition	
NAME			6.2 NAME								
STREET ADDRESS			6.3 STREET	ADDRESS		•					

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, or on an attachment with an address.

SIGNATURE:

FILED

Feb 02 1998 8:00am