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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 22 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000070170 (1)

GLOBAL AERO INDUSTRIAL, INC.

Principal Place	e of Business	Mailing Addres	Mailing Address							
16314 N.W. 9TH DRIVE PEMBROKE PINES FL 33028			16314 N.W. 9TH DRIVE PEMBROKE PINES FL 33028-1114							
							3. Date incorporated or Qualified 08/22/1996	3a. Dat	e of Last R	eport
2. Principal Pl	ace of Business	k	2a. Mailing Address				4. FEI Number	****	Ar	oplied For
21							65-0696215		No	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. 1	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional
22		27	City & State							equired
City & State			28				6. Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip Country		Zij)					This corporation has liability for in		***************************************	
24	25	29	30	] '	•	· ·	i -		No	. 100.002,
<u></u>	9. Name and Address of Curr		·····	!			10. Name and Address of New Reg	istered A	gent	
Guerra, Elizabeth					N	lame 🗼	il.			
	14 N.W. 9TH DRIVE					treet Addre	ess (P.O. Box Number is Not Acceptab	le)		
PEM	BROKE PINES FL 33028			82						
				83	1					
				84	C	City	***************************************	FL	<b>85</b> Zip	Code
							oration submits this statement for the p	urpose of		
office or re agent. Lai	egistered agent, or both, in the Sta m ta hiller with, and accept the obt	ate of Florida. Such cha ligations of, Section 601	inge was auth 7.0505, Florida	orized b a Statute	iy thi is.	e corporati	on's board of directors. I hereby accep	t the appo	iniment as	registered
SIGNATURE	Elevator (Kerra	L EREA	heth (	70€ @	e.	A		1/1	14/97	
	Signariae (fice or printed of sciol registered a		(NOTE: Be		jent si	ignature require	ed when reinstating)	DATE		
12.	OFFICERS AND DIRECTORS    Possible   Delete			13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR Change	RS IN 12 Addition
NAME	THESICONI	<b>,</b>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1.2 NAME					Change	L ROGINON
STREET ADDRESS	Elizabeth Conserva	ž ve		1.3 STREE		ABEGG :				
C11Y - S1 - 71P	Richarde Provide For	(350)8 <sup>9</sup>		1.4 CITY-5						
TITLE			DELETE	2.1 TITLE	ψ1 <u>k</u> ,	<u>"</u>	······································		Change	Addition
NAME				2 2 NAME						
STREET ADDRESS				2 3 STREE	T ADO	DRESS				
CITY-ST-ZIP				2. 4 CITY-	ST-Z	nP .				
TITLE			DELETE	3.1 TITLE				l	Change	☐ Addition
NAME			1	3.2 NAME						
STREET ADDRESS			I	3 3 STREE	T ADC	DRESS				
City-St-ZIP				3.4 CITY-	ST-Z	P)P				
TITLE		<u>[]</u> [	DELETE	4.1 TITLE				l	Change	L. Addition
NAME				4. 2 NAME						
STREET ADDRESS			1	4.3 STREE						
City+St-7iP			DELETE	4.4 CITY-5	ST-ZI	IP			Change	☐ Addition
TI*LE NAME			ZECTE	5.2 NAME				'	onange	L Addition
STREET ADDRESS				5.3 STREE		necec				
			· ·							
E-TY-ST-7IP TITLE			DELETE	5.4 CITY~! 6.1 TITLE	⊙1~ <i>[</i> [	ur .			Change	Addition
NAME		٠ بــــ		6.2 NAME				'		Newd
STREET ADDRESS				6.3 STREE		DRESS				

14. I do 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