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

PROFIT
CORPORATION
ANNUAL REPORT

1997

appears in Block 12



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 10 1997 8:00am

Secretary of State

04/03/97 (305) 823-1565

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000077092 (0)

CUSTOM AIR LEASING, INC.

Principal Flace of Business Mailing Address 7540 LOCH NESS DRIVE 7540 LOCH NESS DRIVE MIAMI LAKES FL 33014 MIAMI LAKES FL 33014-6014 3. Date Incorporated or Qualified 3a, Date of Last Report 09/16/1996 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Applied For 26 Not Applicable 21 Suite, Apt. #, etc Suite. Apt. #. etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be  $\Box$ 23 Trust Fund Contribution Added to Fees 28 Country Country 8. This corporation has liability for intangible tax under s. 199.032 Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CALANDRA, PATRICIA A Y DEATON as (P.O. Box Number is Not Acceptable) AKERMAN, SENTERFITT & EIDSON, P.A. ONE SOUTHEAST THIRD AVENUE, 28TH FLOOR RAVENSWOOD ROAD SUITE MIAMI FL 33131 FORT LAUDERDALE <sup>85</sup> Zip Code 33312 84 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, 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. Lam farmer with, and accept the obligations of, Section 607.0505. Florida Statutes. 04/03/97 registered agent and title it as plicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS (96/6)12. 13. DELETE Change 1.1 TITLE HILL RICHARD R. WELLMAN 7540 LOCH NESS DRIVE MIAMI LAKES, FL 33014 DST 1.2 NAME STHEE ACCORESS 1.3 STREET ADDRESS 1.4 CITY - ST- ZIP C. TY - ST- ZIP DELETE Addition 71116 21 TITLE Change LYNDA C. WELLMAN 22 NAME NAME 7540 Loch Ness Drive Miami Lakes, FL 3301 STREET ADORESS 2.3 STREET ADDRESS OffY ST-ZP 2. 4 CITY - ST - ZIP DELETE Addition 3.1 TITLE 1111 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CHY-ST-ZiP DELETE Change Addition 4.1 TITLE THLE 4.2 NAME NAM 43 STREET ADDRESS STREET ADDRESS 4 4 CITY-ST-ZIP 0114 - 51 - ZIP DELETE Change Addition 5.1 TITLE HILL 5.2 NAME NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CHY-ST ZIE DELETE Change Addition  $T \cap L^{\varepsilon}$ 6.1 TITLE 6.2 NAME **63 STREET ADDRESS** STREET ADDRESS

64 City St- 2P

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 arrunal 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 its corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name