

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000099937

1. Corporation Name

FLAMINGO AIR OF FLORIDA KEYS, INC.

Principal Place of Business

77522 OVERSEA HIGHWAY
ISLAMODORA FL 33034
US

Mailing Address

165 NAUTILUS DRIVE
ISLAMORADA FL 33036

2. Principal Place of Business

2a. Mailing Address

21	77522 OVERSEA Hwy	26	77522 OVERSEA Hwy
22		27	
23	ISLAMORADA	28	ISLAMORADA FL
24	33036	29	33036
25	MONROE	30	MONROE

9. Name and Address of Current Registered Agent

FISHER, CARMEN M
165 NAUTILUS DRIVE
ISLAMORADA FL 33036

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when first filing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	FISHER, CARMEN M	
STREET ADDRESS	165 NAUTILUS DRIVE	
CITY-ST-ZIP	ISLAMORADA FL 33036	
TITLE	D	DELETE
NAME	BOND, CHRIS R	
STREET ADDRESS	181 E. CARROLL STREET	
CITY-ST-ZIP	ISLAMORADA FL 33036	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13.

1.1 TITLE	
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[] Change [] Addition

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*****8.75 *****8.75

DIRECTOR
Rick Bond
165 Nautilus Dr
ISLAMORADA, FL 33036

[] Change [X] Addition

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*****150.00 *****150.00

[] Change [X] Addition

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, with or other like empowered

SIGNATURE:

Chris R. Bond

2-15-99

664-0535 (300)

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