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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 28, 1999 8:00am

**Secretary of State** 

01-28-1999 90060 012 \*\*\*150.00

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P97000005741**1. Corporation Name

AIRLINE PILOT INVESTMENT GROUP, INC.

			•			<b>31 134</b>
Principal Plac	ce of Business	Mailing Address				
4420 NORTH UNIVERSITY DRIVE 4420 NORTH UNIVERSITY LAUDERHILL FL 33351 LAUDERHILL FL 33351			٠.	DO NOT WRITE IN THIS SPACE		
·-					DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed	
	<u>.</u>				01/21/1997	1
2. Principal F	Place of Business	2a. Mailing Address	s		4. FEI Number Applied	For
21		26			65-0739819 Not App	
Suite, Apt.	. #, etc.	Suite, Apt. #, et	tc.		\$8.75 Addition	
22		27			5. Certificate of Status Desired Fee Required	Ė
City & Sta	ite	City & State			6. Election Campaign Financing \$5.00 May	Зе .:
23	. 1	28			Trust Fund Contribution Added to Fee	
Zip	Country	Zip	Count	try	8. This corporation owes the current year Intangible	
24	25	29	30		Personal Property Tax. Yes No	)
	9. Name and Address of Current	Registered Agent	· .		10. Name and Address of New Registered Agent	
ete.	ELE, EUGENE	Contract of the second	8	Name		
	O'N: UNIVERSITY DRIVE	The second of th	8	Street A	Address (P.O. Box Number is Not Acceptable)	
	IDERHILL FL 33351			12	- 1970 - 1970 - 1970 - 1970 - 1981 - 1981 - 1981 - 1980	51.54
				13		2.3
		•	. 8	4 City	<b>E</b> 85 Zip Code	.1 .2 4
14 Pursuant	to the provisions of Sections 607 0502	2 and 607 1508. Florida	Statutes the abo	we-named (	corporation submits this statement for the purpose of changing its regist	ered
			otatutes, the abe	Tro-Hairica	corporation addition and statement for the purpose of changing its regist	Cioa
office or i	registered agent, or both, in the State o	of Florida. Such change.	was authorized b	ov the corpo	oration's board of directors. I hereby accept the appointment as registered	ed .
agent. I a	registered agent, or both, in the State of am familiar with, and accept the obliget	of Florida. Such change.	was authorized b	ov the corpo		ed .
office or i	registered agent, or both, in the State of am familiar with, and accept the obligation	of Florida. Such change ions of, Section 607.050	was authorized b 05, Florida Statute	by the corpo	1-11-92	ed :
agent. I a	registered agent, or both, in the State of am familiar with, and accept the obliget	of Florida. Such change ions of, Section 607.050 and little if applicable.	was authorized b 05, Florida Statute	by the corpo		
office or agent. I a	registered agent, or both, in the State of am familiar with, and accept the obligation of the state of the st	of Florida. Such change ions of, Section 607.050 and little if applicable.	was authorized b 05, Florida Statute (NOTE: Registered Ag	by the corpo	required when reinstating). DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	
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SIGNATURE  12.	registered agent, or both, in the State of am familiar with, and accept the obligation of the state of am familiar with, and accept the obligation of the state o	ons of, Section 607.050 and title if applicable.  D DIRECTORS	Was authorized to post in the	py the corpo	required when reinstating). DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	_   12
SIGNATURE  12. TITLE NAME	registered agent, or both, in the State of am familiar with, and accept the obliget Signature, typed or printed name of registered agent OFFICERS AND STEELE EUGENE H	ons of, Section 607.050 and title if applicable.  D DIRECTORS	Was authorized to post in the	by the corpo	required when reinstating). DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	_   12
SIGNATURE  12.  TITLE NAME STREET ADDRESS	signature, types or printed name of registered agent OFFICERS AND STEELE EUGENE H 4420 NORTH UNIVERSITY DRIVI	ons of, Section 607.050 and title if applicable.  D DIRECTORS	was authorized b 05, Florida Statute  (NOTE: Registered A;  13.  ETE 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY.	y the corpo	I − 1 1 − 9 ¥  required when reinstating). □ DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN □ Change □	_   12
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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 all other like empowered.

6.3 STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

954-746-7200