

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91181 015 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P97000011982																																																																																																																																							
1. Entity Name MEGA AVIATION, INC.																																																																																																																																							
Principal Place of Business 10008 W FLAGLER ST #159 MIAMI, FL 33174		Mailing Address 10008 W FLAGLER ST #159 MIAMI, FL 33174																																																																																																																																					
2. Principal Place of Business 6201 SW 131 Ct.		3. Mailing Address 6201 SW 131 Ct																																																																																																																																					
Suite, Apt. #, etc. 202		Suite, Apt. #, etc. 202																																																																																																																																					
City & State Miami FL		City & State MIAMI FL																																																																																																																																					
Zip 33183	Country USA	Zip 33183	Country USA																																																																																																																																				
4. FEI Number 65-0733118		Applied For ☐ Not Applicable																																																																																																																																					
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																																																																																																																																							
6. Name and Address of Current Registered Agent BADILLO, TULIA S 10008 W FLAGLER ST #159 MIAMI, FL 33174		7. Name and Address of New Registered Agent Name Badillo Tulia S Street Address (P.O. Box Number is Not Acceptable) 6201 SW 131 Ct. # 202 City MIAMI FL Zip Code 33183																																																																																																																																					
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>[Signature]</i></u> DATE <u>5/1/03</u> (Signature, if you are not the name of registered agent and title if applicable) (NOTE: Registered Agent's signature required when registering)																																																																																																																																							
FILE NOW! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees																																																																																																																																					
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																																																																																																																																					
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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																																																																																																																							
SIGNATURE: <u><i>[Signature]</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date <u>5/1/03</u> 305 385-7472 Daytime Phone #																																																																																																																																					

90129986



☐ CHECK HERE IF MAKING CHANGES

CH2E034 (10/02)