

AMENDED

page 1 of 2

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

02 JUN -3 PM 2:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000027488

1. Entity Name
Koinonia Flying Services, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3800 Southern Blvd.		3. Mailing Address 3800 Southern Blvd.	
Suite, Apt. #, etc. Bldg. 1625A, Suite 208		Suite, Apt. #, etc. Bldg. 1625A, Suite 208	
City & State West Palm Beach, FL		City & State West Palm Beach, FL	
Zip 33406	Country USA	Zip 33406	Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0746379	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name Valdes-Fauli Corporate Services, Inc.
Street Address (P.O. Box Number is Not Acceptable) 777 S. Flagler Drive, Suite 500 East
City West Palm Beach **FL** **Zip Code** 33401

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.

VALDES-FAULI CORPORATE SERVICES, INC.

SIGNATURE By: [Signature] **DATE** 6/5/02
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
(See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPST John Sterrett 3800 Southern Blvd., Bldg 1625A #208 West Palm Beach, FL 33406
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVP William Anderson 3800 Southern Blvd., Bldg 1625A #208 West Palm Beach, FL 33406
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] **John Sterrett** **May 28, 2002** **(561) 616-8663**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)

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