

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 03 1998 8:00am
Secretary of State

DOCUMENT # P97000037524 (0)

1. Corporation Name

OCEAN FLYERS, INC.



Principal Place of Business

Mailing Address

201 S BISCAYNE BLVD
SUITE 1402
MIAMI FL 33131

201 S BISCAYNE BLVD
SUITE 1402
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/24/1997

4. FEI Number

65-0764143

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

Yes No

2. Principal Place of Business

2a. Mailing Address

21 2601 South Bayshore Dr.
Suite, Apt. #, etc.

25 2601 South Bayshore Dr.
Suite, Apt. #, etc.

22 Suite 1600

27 Suite 1600

23 Miami Florida
City & State

28 Miami Florida
City & State

24 33133 25 USA
Zip Country

29 33133 30 USA
Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

OLLE, DENNIS J
201 S BISCAYNE BLVD
SUITE 1402
MIAMI FL 33131

81 Name

Dennis J. Olle

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

2601 South Bayshore Drive

83 Suite 1600

84 City Miami

FL

85 Zip Code 33133

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 signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE

NAME HARPER, ALLEN C
STREET ADDRESS 1360 S DIXIE HWY
CITY-ST-ZIP CORAL GABLES FL 33146

1.1 TITLE D/A/S ☒ Change ☐ Addition

TITLE D ☐ DELETE

NAME OLLE, DENNIS J
STREET ADDRESS 201 S BISCAYNE BLVD SUITE 1402
CITY-ST-ZIP MIAMI FL 33131

2.1 TITLE ☒ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
2.2 NAME
2.3 STREET ADDRESS 2601 South Bayshore Drive # 1600
2.4 CITY-ST-ZIP Miami Florida 33133

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

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 as an attachment with an address.

SIGNATURE
1-26-98 (305) 113-9971

CP2E034 (10/97)