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

**CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000049038 (7)

ATLANTIC INTERNATIONAL AIR & FREIGHT INC.

## **FILED** May 14 1998 8:00am Secretary of State



Principal P	lace of Busines:	S	М	Mailing Address						
7830 PISSARRO DRIVE #205				7630 PISSARRO DRIVE #205						
ORLANDO FL 32819				ORLANDO FL 32819				DO NOT WRITE IN THIS SPACE		
								3. Date Incorporated or Qualified		
								06/02/1997		
2. Principa	l Place of Busin	1058	2a.	Mailing Address				4. FEI Number Applied For		
21			26	26				Not Applicable		
Sulte, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional		
22			27					Fee Required		
City & State			ļ <sub>1</sub>	City & State				6. Election Campaign Financing \$5.00 May Be		
23 Zin				28				Trust Fund Contribution Added to Fees		
Zip	-	Country		Zip	Cour	itry		8. This corporation owes or has paid the current year Intangible		
24		25 and Address of Cur	29	tered Agent	30			Personal Property Tax due June 30.  Yes No  10. Name and Address of New Registered Agent		
			Toni Hogis	torea Agoin		B1	Name			
	GIFFIN, CRAI		, Thairio							
7630 PISSARRO DRIVE #205 ORLANDO FL 32819						B2	Street #	Street Address (P.O. Box Number is Not Acceptable)		
	ONDANDO FL	. 32019			h	B3				
					[i	84	City	FL 85 Zip Code		
44 Pursua	int to the provisi	ions of Sections 607	0502 and 6	07 1508 Florida Stati	ites the ab		-pamed	od corporation submits this statement for the purpose of changing its registered		
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.										
_		т, ала ассерстве ог	a ganons o	1, Section 607,0505, 1	iorida Statu	ites.				
SIGNATUR	Signature typed	or printed name of registered	i Agent and Hio	d apple, alice (NC	TE: Registered	Ager	nt signature	ure required when reinstating) DATE		
12.		OFFICERS			13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE		DELETE 1		1.1 101	.E		DITIS			
NAME				1.2 N		ÆΕ		Craig D. Giffin Dr. # 205		
STREET ADDRES	ET ADORESS			1.3 STREET ADD		ADDRESS	7630 Pissarro Dr. # 205			
CITY-ST-ZIP					1.4 CIT	y-ST	-ZIP	Orlando, FL 32819		
TITLE				DELETE 2.11		.E	☐ Change ☐			
NAME				2.2		2.2 NAME				
STREET ADDRES	DAESS			2		2.3 STREET ADDRESS		;   · · ·		
CITY-ST-ZIP	- ZIP					2.4 CITY-ST-ZIP				
TITLE				DELETE 3.11		£		Change Addition		
NAME				32 N		AF.				
STREET ADDRES	SS				3 3 STA	EET #	ADDRESS			
CITY-ST-ZIP				T Severe	3 4. CIT		r-ZIP			
TITLE		☐ DELETE				Change Addition				
NAME					4. 2 NA	ME.				
STREET ADDRES	SS						ADDRESS			
CITY-ST-ZIP				Doctor	4.4 CITS		-ZIP			
TITLE				DELETE 5.1 TI				LI Change LI Addition		
NAME					5 2 NAM					
STREET ADDRES	35						ADDRESS			
CITY-ST-ZIP	<del></del>			Doutt	5.4 CITY		- ZIP	The state of the s		
TITLE				☐ DELETE	6.1 TITL			500002526925 Change Lifetion		
NAME OTOGET ADDRESS					6.2 NAN			500002526925 V		
STREET ADDRES	20						ADDRESS	***150.00		
CITY-ST-ZIP	v certify that the	o information energia	d with the f	iling does not muslify	6.4 CITY			ted in Section 119.07(3)(i) Florida Statutae I further certify that the information		

Thereby 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 informatio indicated on this annual report is proposed in the composition of the corporation of the corporation of 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 an attachment with an address.