

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 13, 2001 8:00 am
Secretary of State

09-13-2001 90054 015 ***150.00

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DOCUMENT # P97000049618

1. Entity Name
ABSOLUTE AIRWAYS, INC.

Principal Place of Business
1560 SW 23 ST
FT. LAUDERDALE FL 33315

Mailing Address
1560 SW 23 ST
FT. LAUDERDALE FL 33315

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0757471

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PIOTROWSKI, BRUNO
1560 SW 23 ST
FT. LAUDERDALE FL 33315

Name

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

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D/P
PIOTROWSKI, BRUNO
1560 SW 23RD ST
FORT LAUDERDALE FL 33315

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)

Attachment Doc# PA70000496/8 A0085502

Absolute airways

Bruno Piotrowski
1560 SW 23 Street
Fort Lauderdale, FL 33315

To:

Uniform Business Report
Supervisor Div. of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Subject: Late fee waived request

To whom it may concerns;

Following the recommendations of one of your agent on the phone, I would like to present to you my request for waiving the late fee associate to my UBR. To make it short, my accounting office has sent my UBR Form without the \$150. I understand that is my responsibility to make sure the check is properly enclosed in and I take it. Than your office has recorded sending us a notice of payment within 30 days since the check was missing. I have to thank you for your patience. But letter never make it to my office. We have a lot of construction on the street at the time that has disrupted our mailing service. The notification may have been mistaken for a junk mail. Today sir, I don't have a explanation to relay.

All I know is the fee is overdue. The initial \$150' fee is enclosed. And it will never happen again.

I count on your understanding to waive the extra fee for me.

Sincerely,

Bruno Piotrowski,
President.

