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

PROFIT. -, CORPORATION ANNUAL REPORT



H ORIDA DEPARTMENT OF STATE

Sandra B. Mofiham **

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000062215 (3)

DANVILLE AVIATION SERVICES, INC.

Principal Place of Business	Mailing Address		1 1 balliddt 110 talit i delt datti balli batti batti batti batti tibis sibis sibit tibis	
2811 SOUTHWEST 70TH AVE.	2811 SOUTHWEST 70TH AV	E .		
MIAMI FL 33155	MIAMI FL 33155		DO NOT WRITE IN THIS SPACE	
			3. Date Incorporated or Qualified	
			07/17/1997	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number 2011/20 Applied For	┛
21	[26]		Not Applicable	4
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired See Required	1
City & State	City & State			\dashv
23 City & State	28	_	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip Country	7ip	Country	8. This corporation owes or has paid the current year Intangible	٦
24 25	29 30		Personal Properly Tax due June 30. Yes No	
9. Name and Address of Curr			10. Name and Address of New Registered Agent	
CORPORATION SERVICE COMPA	NY /	81 Name	Dana C. Sheldon	
1201 HAYS STREET		82 Street A		٦
TALLAHASSEE FL 32301		2811	Address (P.O. Box Number is Not Acceptable) L S.W. 70 Avenue	
1		83		
		84 City	■■ 85 Zip Code	۲
		Mia	ami FL 33155	╛
11. Pursuant to the provisions of Sections 607.0	502 and 607.1508, Florida Statutes,	the above-named o	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered	
agent 1 am tamiliar with, and accounts on	tions of Section 607,0505, Florid	ia Statutes.		
SIGNATURE	Dana C	. Sheldon	March 30, 1998	
Strate Typed or petals directed respectives to		legislared Agent signature i	DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	\dashv
////Imparidont/Dogs	AND DIRLCTORS		President/Registered Agentange Addition	Н
Dane C Chalda	_		Dana C. Sheldon	
SIREEL ADDRESS 2811 SW 70th A			2811 SW 70th Avenue	
Minmi Dr 2215			Miami, FL 33155	
TITLE FILAMI, FL 3313	DELFTE	21 HILE	Change Addition	
NAME		22 NAME		
STREET ADDRESS	1	2 3 STREET ADDRESS		ļ
CITY-ST-ZIP		2. 4 CITY-ST-ZIP		
TITLE	☐ DELETE	3 1 HTLF	Change Addition	,
NAME	l	3.2 NAME		
STREET ADDRESS	l l	3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY - ST - ZIP		_
TITLE	☐ DELETE	4.1 TITLE	☐ Clange ☐ Apulition	1
NAME	l	4. 2 NAME	A(1,1,1,1)	X
STREET ADDRESS	l	4,3 STREET ADDRESS	~/ <i>\</i> \(<i>(\lambda</i>) //	
CITY-ST-ZIP	- Order	4.4 CITY - ST - ZIP	Chance Addition	_
TITLE	☐ DELETE	5.1 T(TLE	Change C Addition	
NAME	l l	5.2 NAME		
STREET ADURESS	l	5.3 STREET ADDRESS		
CITY-ST-ZIP	DELETE	5.4 C(1Y - S1 - Z(P	Change Addition	_
TITLE	☐ DITUE	6.1 TIFLE	GDNOUSST184T; Dxm.	
NAME	l	6.2 NAME	60m0027571840 -06/25/88-01912-020	
STREET ADDRESS	!	6.3 STREET ADDRESS	wasted CO compa	

14. I hereby certify that the information supplied but 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 immul report or supplied but 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 immul report or supplied but that I am an officer or director 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 by the an attachment was an address.

64 CITY - ST - ZIP

3/20/20 20520

FILED

Jun 24 1998 8:00am

Secretary of State