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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

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P97000079201 (4) DOCUMENT # 1. Corporation Name

AIRPORT EXECUTIVE LIMO, CORP.

Principal Place of Business Mailing Address 895 S.W. 127TH COURT 895 S.W. 127TH COURT MIAMI FL 33184 MIAMI FL 33184 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/12/1997 2a. Mailing Address Applied For 2. Principal Place of Business 65-078098 Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip Country Žiρ 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. 24 29 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name ORMAZABAL, SERGIO N 895 S.W. 127TH COURT Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33184** Zip Code 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 little if applicable (NOTE Registered Agent signature required when re-installing) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change ☐ Addition 1.1 TITLE TITLE ORMAZABAL, SERGIO M 1.2 NAME NAME 895 S.W. 127TH COURT STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33184 CITY-ST-ZIP 1.4 CITY - ST - ZIF DELETE Change Addition 2.1 TITLE TITLE NAME **IGLESIAS. ORESTES** 9420 S.W. 37TH ST. 2.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33165** 2 4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 3.1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP CITY-ST-ZIP ☐ Change Addition DELETE 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 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 on an attachment with an aeddress

FILED

Apr 29 1998 8:00am

Secretary of State