

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Aug 26 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P97000101624 (9)

1. Corporation Name

NEW WORLD AVIATION, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
15001 NORTHWEST 42 AVENUE  
MIAMI FL 33054

Mailing Address  
15001 NORTHWEST 42 AVENUE  
MIAMI FL 33054

2. Principal Place of Business

21 15001 NW 42 AVE

Suite, Apt. #, etc.

22 City & State  
Miami Florida

23 Zip  
33160

24 Country  
DADE

2a. Mailing Address

26 345 NW 135ST

Suite, Apt. #, etc.

27 City & State  
Miami Florida

28 Zip  
33160

29 Country  
DADE

3. Date Incorporated or Qualified

12/03/1997

4. FEI Number

65-0798815

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$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

9. Name and Address of Current Registered Agent

AMERILAWYER  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PSTD  
BELLO, LUIS A  
15001 NORTHWEST 42 AVENUE  
MIAMI FL 33054

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

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 address.

SIGNATURE

SIGNATURE OF REGISTERED AGENT

8-14-98

CR2E034 (5/98)

15001 NW 42<sup>nd</sup> Ave Miami, Florida 33054  
Tel: (305) 687-2782 Fax: (305) 687-2782

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**New World Aviation**

August 9, 1998

Division of Corporations  
Annual Report filings  
P.O Box 1500  
Tallahassee FL 32302-1500

To whom it may concern:

This letter is to inform you that as of 8-4-98 I have not received my notice for renewal of corporation. This may be due to an error in you data bank towards my address. The address were you could send me any correspondence is the following:

345 NW 135 Street  
Miami, Florida 33168

Sincerely,

Luis Bello  
Director of Operations

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