

2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED

06 DEC 26 PM 3:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000105589

1. Entity Name
HERMAN'S AVIATION CORPORATION



Principal Place of Business
3881 NW 125TH ST
OPA LOCKA, FL 33054

Mailing Address
1228 WEST 80TH STREET
HIALEAH, FL 33014

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

APPLIED FOR 65-0250444

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

ORGANVIDEZ, HERNAN
1228 WEST 80TH STREET
HIALEAH, FL 33014

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE HERNAN ORGANVIDEZ -PRESIDENT

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

(NOTE: Registered Agent signature required when reinstating)

12-6-06

DATE

FILE NOW!!! FEE IS \$750.00
After January 1, 2007, Fee will be \$900.00

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME ORGANVIDEZ, HERNAN
STREET ADDRESS 1228 WEST 80TH STREET
CITY-ST-ZIP HIALEAH, FL 33014 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
500082443655
12/11/06--01059--018 **750.00

TITLE V
NAME ORGANVIDEZ, JR, HERNAN
STREET ADDRESS 1228 W 80 ST
CITY-ST-ZIP HIALEAH, FL 33014 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME ORGANVIDEZ, RITA MAITE
STREET ADDRESS 1228 W 80 ST
CITY-ST-ZIP HIALEAH, FL 33014 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Hernan Organvidez

HERNAN ORGANVIDEZ

PRESIDENT

12-6-06 305 558-9534

Date

Daytime Phone #

K. Eckel DEC 26 2006