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Apr 27, 1999 8:00 am
Secretary of State

04-27-1999 90104 042 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000030290

1. Corporation Name

PINNACLE AVIATION, INC.

Principal Place of Business

472 DEWARS CT.
WINTER SPRINGS FL 32708

Mailing Address

472 DEWARS CT.
WINTER SPRINGS FL 32708

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/30/1998

2. Principal Place of Business

21
Suite, Apt. #, etc.
22
City & State
23
Zip
25
Country

2a. Mailing Address

26
Suite, Apt. #, etc.
27
City & State
28
Zip
30
Country

4. FEI Number

59-3511627

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 the current year intangible Personal Property Tax.

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

STEENBERGH, ROBERT M
600 N. HWY. 17-92 STE. 122
LONGWOOD FL 32750

81 Name

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

83 **SUITE 100**

84 City

ORLANDO**FL**

85 Zip Code

32825

10. Name and Address of New Registered Agent

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

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
D
HACKETT, D K
472 DEWARS CT.
WINTER SPRINGS FL 32708
☐ DELETE
2.1 TITLE
2.2 NAME
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36.1 TITLE
36.2 NAME
36.3 STREET ADDRESS
36.4 CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER/DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)