SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE 🧓

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

WHOLESALERS LOVE IS IN THE AIR, CORP.

Principal Place of Business

17400 NW 66TH AVENUE SHITE 301

Mailing Address

17400 NW 66TH AVENUE

FILED Sep 03, 1999 8:00 am Secretary of State

09-03-1999 90008 005 ***550.00



HIALEAH FL 330	ns Hialeah Fl 33015		DO NOT WRITE IN THIS SPACE
			3. Date Incorporated or Qualified
			04/16/1998
2. Principal Pl	ace of Business 2a. Mailing Address	1°	4 EE Number
21 228	34 WEST 77Th St 26 2284 W	IEST 77T	15
Suite, Apt.			\$8.75 Additional
22	27		5. Certificate of Status Desired Fee Required
City & State City & State		,,	6. Election Campaign Financing \$5.00 May Be
	iAMI + C , 28 MIAMI,	+ (Trust Fund Contribution Added to Fees
Zip Zip Zip Zip		Country	8. This corporation owes the current year
図 3 つ	016_{25} $29.33016.30$		Intangible Personal Property. Yes No
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent
			LONGA CHRISTIAN
LONG	ga, Christian	82 Street	LONGA (HRISTION Address (P.O. Box Number is Not Acceptable)
17400 NW 66TH AVENUE		82 Street	Address (P.O. Box Number is Not Acceptable)
SUITE 301		83	22011 11 77th State
	EAH FL 33015		2284 WEST 77" STREET
		84 City	Miami FL 85 Zip Code 16
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	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD DELETE	1.1 TITLE	PD Change Addition
NAME	LONGA, CHRISTIAN	1.2 NAME	LONGA, CHRISTIAN
1		1.3 STREET ADDRESS	ZZBY WEST 77TH ST
STREET ADDRESS	17400 NW 66TH AVENUE		Miami, FL 33016
CITY-ST-ZIP	HIALEAH FL 33015	1.4 CITY-ST-ZIP	
TITLE	VD OELETE	2.1 TITLE	
NAME	LONGA, ALEXANDER	2.2 NAME	LONGA, ALEXANDER
STREET ADDRESS	17400 NW 66TH AVENUE	2.3 STREET ADDRESS	2201
CITY-ST-ZIP	HIALEAH FL 33015	2.4 CITY-ST-ZIP	Miami, 7(33016
TITLE	DELETE	3.1 TITLE	Change Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	OELETE	4.1 TITLE	Change Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	,
TITLE	DELETE	5.1 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	Change Addition
	L DELETE		L Change L Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	,
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

I nereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(f). 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:

305) 828-8181