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PROFIT CORPORATION ANNUAL REPORT



Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 23, 1999 8:00 am Secretary of State FLORIDA DEPARTMENT OF STATE

04-23-1999 90190 041 ***150.00

1999 DOCUMENT # P98000047556

COOK AVIATION, INC.

1. Corporation Name

Principal Place of Business Mailing Address 11310 SW 57 STREET 11310 SW 57 STREET MIAMI FL 33173 MIAM! FL 33173 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 05/26/1998 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business Not Applicable Home 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be 6. Election Campaign Financing City & State Trust Fund Contribution Added to Fees 28 23 Country 8. This corporation owes the current year Intangible Zio □No Personal Property Tax. 30 29 24 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent 81 COOK, RODNEY Street Address (P.O. Box Number is Not Acceptable) 82 11310 SW 57 STREET **MIAMI FL 33173** 83 85 Zip Code 84 City 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 registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Addition Change **PVST** DELETE 1.1 TITLE TITLE COOK, RODNEY 1.2 NAME NAME 11310 SW 57 STREET STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33173** 1.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ DELETE TITLE 2.1 TITLE COOK, RODNEY 2.2 NAME NAME 11310 SW 57 STREET 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33173 CITY-ST-ZIP 2.4 CITY-ST-ZIP Addition □ DELETE ☐ Change 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change □ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ Change Addition ☐ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change ☐ Addition ☐ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

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 I hereby certify that the information supplied with this filing does not quality 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, with all other like empowered.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

305-401-2662

CR2E034 (11/98