# FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

# DOCUMENT # P98000062721 1. Corporation Name

RERGAS AVIATION INC

# FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90131 015 \*\*\*150.00

Principal Plac	ce of Business	Mailing	Address				\$ 10011001 II O 10101 IBIII GAIRI OBIII		/1 FIU 1 FB/1 1 U U U		
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2843 NE 28TH ST.   2843 NE 28TH ST.   FT.LAUDERDALE FL 33306   FT.LAUDERDALE FL 34306   FT.LAU											
							DO NOT WRITE	IN THIS	SPACE		
							3. Date Incorporated or Qualifed 07/15/1998				
2. Principal F	Place of Business	2a. Maili	ing Address	<del></del>			4. FEI Number		IQA	olied For	
21		26					65-0852131		<del></del>	Applicable	
Suite, Apt.	. #, etc.		e, Apt. #, etc.					_	\$8.75 A		
22		27	•				5. Certifcate of Status Desired		Fee Rec		
City & Star	te		& State				6. Election Campaign Financing		\$5.00	May Ro	
23		28					Trust Fund Contribution		Added to		
Žip	Country	Zip		Coun	ıtry		8. This corporation owes the curren	t vear Inta	angible		
24	25	29		30			Personal Property Tax.			□No	
	9. Name and Address of Curren	t Registered					10. Name and Address of New Reg	jistered /	Agent		
				1	81	Name					
	ETSKY, IRWIN			-	02	Straat Addrag	on (D.O. Boy Number in Not Assentable	٥)			
2843 NE 28TH ST.				l'	82 Street Address (P.O. Box Number is Not Acceptable)					Ì	
FT.LAUDERDALE FL 33306			17	83							
				Ļ							
					84	City	•	FL	85 Zip C	ode	
11. Pursuant office or agent. I a	am familiar with, and accept the obligat	2 and 607.150 of Florida. Sui tions of, Secti	08, Florida Statute ch change was au ion 607.0505, Flori	s, the about thorized ida Statul	tes.	named corpor he corporation	ration submits this statement for the puris board of directors. I hereby accept the	rpose of o	changing its rather than the street as reg	registered pistered	
O O O O O O O O O O O O O O O O O O O	Signature, typed or printed name of registered agent	t and title if applica	ible. (NOTE:	Registered A	\gent :	signature required v	when reinstating)	DATE			
12.	OFFICERS AN	D DIRECTOR		13.			ADDITIONS/CHANGES TO OFFIC	CERS AN			
TITLE	PACS BOTTON	** *	☐ DELETE	1.1 TITL	E				Change	☐ Addition	
NAME	IAWIN BEALTSK	0000	~~	1.2 NAM	Æ						
STREET ADDRESS	2843 NE 287	2/16	220 - 1	1.3 STR	EET A	ADDRESS					
CITY-ST-ZIP	FT. LAUDERDALE	-,:		1.4 CITY	Y-ST-	ZIP					
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NAME				2.1 (1)	.E				Change	Addition	
STREET ADDRESS				2.1 (IIC					Change	Addition	
				2.2 NAM	Æ	ADDRESS			Change	Addition	
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)( Selorida 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 sacelegal 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 60. 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.