

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000037698

1. Entity Name

Check Mark Aviation, Inc.

Principal Place of Business

15360 SW 302nd St.  
Homestead, Fl. 33033

Mailing Address

Same

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

65-1013976

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

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.

SIGNATURE

*Luis F. del Rosario*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back)

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2001 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME	PD Luis F. del Rosario	<input type="checkbox"/> Delete
STREET ADDRESS	15360 SW 302nd St.	
CITY-ST-ZIP	Homestead, Fl. 33033	
TITLE NAME	Sec. Gerardo Sanchez	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	14807 SW 82nd Ter.	
CITY-ST-ZIP	Miami, Fl. 33196	
TITLE NAME	V.P. Jose Hernandez	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	4030 NW 26th St.	
CITY-ST-ZIP	Miami, Fl. 33142	
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		

TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Luis F. del Rosario*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Phone: #

FILED  
Jul 23, 2001 8:00 am  
Secretary of State

07-23-2001 90003 001 \*\*\*150.00

A0078950

DO NOT WRITE IN THIS SPACE



Attachment  
A0078950

FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

July 6, 2001

CHECK MARK AVIATION INC.  
15360 SW 302 STREET  
HOMESTEAD, FL 33033

SUBJECT: CHECK MARK AVIATION INC.  
Ref. Number: P99000037698

We have received your check(s) totaling \$150.00; however it cannot be processed and is being returned for the following:

There was not a completed annual report/uniform business report form submitted with your check. The enclosed form must be completed in its entirety and resubmitted with the filing fee.

Please include your June 25, 2001 letter stating non receipt of the report with the completed uniform business report.

**TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.**

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Sean Toner  
Senior Section Administrator

Letter Number: 801A00040165