

2000 UNIFORM BUSINESS REPORT (UBR)

3.

DOCUMENT # P99000106424

1. Entity Name

AVIATION MARKETING SERVICES, INC.

P

FILED
Jul 19, 2000 8:00 am
Secretary of State

03-04-2000 90059 012 ***150.00

Principal Place of Business 3100 NORTH OCEAN BLVD. #F1406 FORT LAUDERDALE FL 33308	Mailing Address 3100 NORTH OCEAN BLVD. #F1406 FORT LAUDERDALE FL 33308
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0974585		Applied For ☒ Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent M & W AGENTS, INC. 2101 CORPORATE BLVD. SUITE 107 BOCA RATON FL 33343	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ (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, 2000 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
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP PRESIDENT LAURENCE T. HUGHES 3100 N. OCEAN BLVD. - 1406 FT. LAUDERDALE	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

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 a power like empowered.

SIGNATURE: LAURENCE T. HUGHES FEBRUARY 24, 2000 (954) 566-360

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)

Doc #P99000106424

308400

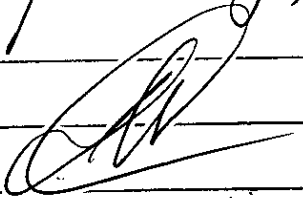
Florida Department of State
Division of Corporations
P.O. Box 6327,
Tallahassee, 32314
FL.

SUBJECT: AVIATION MARKETING SERVICES, INC.

Ref #: P 99000 106424

Enclosed is the completed form with the pertinent FEI number for your records. Please note that the fee and form were filed on time for the fee of \$150.00.

Yours truly,



Mr. L. T. HUGHES

PRESIDENT, AVIATION MARKETING SERVICES, INC.