

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

FILED

Jan 22 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **S45677** (9)  
1. Corporation Name  
**UNITED STATES BALLOON CORPORATION**



Principal Place of Business  
**6000 NW 28TH WAY  
HANGER A-1  
FT. LAUDERDALE FL 33309**

Mailing Address  
**6000 NW 28TH WAY  
HANGER A-1  
FT. LAUDERDALE FL 33309-6611**

3. Date Incorporated or Qualified  
**04/15/1991**

3a. Date of Last Report  
**03/25/1996**

2. Principal Place of Business  
21 **635 NW 4th Ave**  
Suite, Apt. #, etc.  
22  
City & State  
23 **Fort Lauderdale, FL**  
Zip Country  
24 **33311** 25  
2a. Mailing Address  
26 **635 NW 4th Ave**  
Suite, Apt. #, etc.  
27  
City & State  
28 **Fort Lauderdale, FL**  
Zip Country  
29 **33311-7322** 30

4. FEI Number  
**65-0253487**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent  
**HOLLEY, STEVEN P  
6000 NW 28TH WAY  
HANGER A-1  
FT. LAUDERDALE FL 33309**

10. Name and Address of New Registered Agent  
81 Name **Steven P Holley**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**635 NW 4th Avenue**  
83  
84 City **Fort Lauderdale, FL** 85 Zip Code **33311-7322**

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: **Steven P. Holley** 1/6/97  
(NOTE: Registered Agent signature required when resigning)

12. OFFICERS AND DIRECTORS

TITLE	<b>P</b>	<input type="checkbox"/> DELETE
NAME	<b>HOLLEY, STEVEN PAUL</b>	
STREET ADDRESS	<b>6000 NW 28TH WAY, A-1</b>	
CITY - ST - ZIP	<b>FT. LAUDERDALE FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<b>President</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>Steven P. Holley</b>	
1.3 STREET ADDRESS	<b>635 NW 4th Avenue</b>	
1.4 CITY - ST - ZIP	<b>Fort Lauderdale, FL 33311</b>	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do 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 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 or changed or on an attachment with an address.

SIGNATURE: **Steven P. Holley** 1/6/97 954-767-8966  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)