FILED FILE NOW: FILING FEE AFTER MAY 1 May 19 1997 8:00am PROFIT FLORIDA DE Secretary of State

CORPORATION



ANNI	JAL REPORT 1997	Sec. DIVISION O	o, o. o F CORPOR		ONS			
•	MENT # S5568 AIR INC.	(2)				1 130 1131 3 10 1 0 110 1 0 110 2 0 110 1 10 111 0 1111		818H 818H 818H 818H 818H 188
Principal Place of Business 2525 NW 72ND AVENUE MIAMI FL 33122 US		Mailing Address 9990 SW 77TH AVE. SUITE 330 MIAMI FL 33156-2661	9990 SW 77TH AVE. SUITE 330					
2. Principal P	Place of Business	2a. Mailing Address			- · · · ·	3. Date Incorporated or Qualified05/28/19914. FEI Number		Pate of Last Report //05/1996
21		26]	f) *			65-0412457		Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Additional
City & Stat	Δ	City & State						Fee Required
23	o .	28				Election Campaign Financing Trust Fund Contribution	Π	\$5.00 May Be Added to Fees
Zip.	Country	Zip	Co	untry		8. This corporation has liability for i	intangible	
24	25 9. Name and Address of Curr	29	30	-1			Yes [
• MAF		ent negistereu Agent		81	Name	10. Name and Address of New Re	gisterea	Agent
MARGOLIS, JOHN A ESQUIRE 9990 SW 77TH AVE.						1970 market of decision and appropriate to the contract of the		
SUITE 330				82	Street Addr	ess (P.O. Box Number is Not Acceptab	de)	
MIAMI FL 33158				83				
				84	City			85 Zip Code
				1 1	l		FL	. ``
Pursuant office or r	to the provisions of Sections 607.05 egistered agent, or both, in the Sta	502 and 607.1508, Florida Stat ₃te of Florida. Such change wa	rutes, the a is authorize	abovo ad by	o-named corp the corporat	oration submits this statement for the p ion's board of directors. I hereby accep	urpose o	f changing its registered pointment as registered
	m familiar with, and accept the obl	ligations of, Section 607.0505,	Florida Sta	atutes	ŝ.		• • •	3
SIGNATURE	Signature, typed or printed name of registered a	agent and title if applicable (N	IOTE Registen	ud Age	ont signature requir	ed when reinstating)	DATE	
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	The second secon
TITLE	PD FONESTO	☐ DELETE	1.17					Change Addition
NAME OTOTET ADDRESS	MILLON, ERNESTO 2525 NW 72ND AVENUE			1MAV				
STREET ADDRESS	MIAMI FL				ADDRESS			
CITY-ST-ZIP TITLE	D	☐ DELETE	2.1 T	CITY - S	1 - ZIP			Change Addition
NAME	MILLON, ERIKA		2.2 N					
STREET ADDRESS	2525 NW 72ND AVENUE		238	STREET	ADDRESS			
CITY-ST-ZIP	MIAMI FL			CITY-S	i			
TITLE		☐ DELETE	31T	ITLE				Change Addition
NAME				IAME	'			
STREET ADDRESS			•		ADDRESS			
CITY-ST-ZIP TITLE		DELETE	34.0 4.1 T	CHY-S	-1 - ZIP			Change Addition
NAME		precit	4.21					Change Addition
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP				HTY-S1	1		,	
TITLE		DELETE	5.1 TI	ITLE			11	Change Addition
NAME			52N	IAME			1][5/1/2
STREET ADDRESS			5.3 S	TREET	ADDRESS		77 L	Y/9/QQ
CITY-ST-ZIP		DELETE		H1Y-S1	1 - 71P	<i>U</i>	()	7 / / / /
TITLE NAME		L DELETE	6.1 TI					Change Addition
STREET ADDRESS			6.2 N		ADDUCC	20000219 -06/03/970101	321	ے <u>ر</u> 11
OTTLET ADDRESS			0.3 8	inccli	ADDRESS		506	- I

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 if changed, or of an attachment with an address.