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PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **S61951** **(7)**

1. Corporation Name
PDK AVIATION, INC.

Principal Place of Business	Mailing Address
~~22050 SW 134 AVE.~~ ~~MIAMI FL 33170~~ ~~US~~	~~22050 SW 134 AVE.~~ ~~MIAMI FL 33170~~ ~~US~~

3. Date Incorporated or Qualified: 06/21/1991
3a. Date of Last Report: 05/01/1995

4. FEI Number: 65-0271988 ☐ 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

2. Principal Place of Business	2a. Mailing Address
21 13727 SW 152 St.	26 13727 SW 152 St.
22 Suite, Apt. #, etc. #236	27 Suite, Apt. #, etc. #236
23 City & State MIAMI FL	28 City & State MIAMI FL
24 Zip 33177 25 Country USA	29 Zip 33177 30 Country USA

9. Name and Address of Current Registered Agent

~~KUNZ, PETER~~
~~22050 SW 134 AVE.~~
~~MIAMI FL 33139~~

Petra Kunz

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 13727 SW 152 St #236
83 MIAMI
84 City TEL 305 278-3820 FL 85 Zip Code 33177

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 NANCY JANE SHAPIRO DATE 5/1/96
Signature, Typed or Printed Name of Registered Agent and Date (NOTE: Registered Agent signature required when changed)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD KUNZ, PETER ~~22050 SW 134 AVE.~~ ~~MIAMI FL~~	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☒ Change ☐ Addition 13727 SW 152 St. #236 MIAMI FL 33177
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~STD~~ ~~SHAPIRO, NANCY~~ ~~22050 SW 134 AVE.~~ ~~MIAMI FL~~	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 on an attachment with an address.

SIGNATURE: PDK AVIATION 278-3820
5/1/96 305 257-5064
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone Number
NANCY JANE SHAPIRO Petra Kunz SHAPIRO