

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

FILED  
Mar 27 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **S96645** (4)  
1. Corporation Name  
**ALEX AIR, INC.**

Principal Place of Business <b>402 S WESTSHORE BLVD TAMPA FL 33609 US</b>	Mailing Address <b>402 S WESTSHORE BLVD TAMPA FL 33609 US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>3200 N.E. 14th St.</b> Suite, Apt. #, etc. <b>Causeway,</b>		2a. Mailing Address 26 <b>3200 N.E. 14th St.</b> Suite, Apt. #, etc. <b>Causeway</b>		3. Date Incorporated or Qualified <b>11/25/1991</b>
22 City & State 23 <b>POMPANO BEACH, FL</b> Zip Country 24 <b>33062</b> 25 <b>USA</b>		27 City & State 28 <b>POMPANO BEACH, FL</b> Zip Country 29 <b>33062</b> 30 <b>USA</b>		4. FEI Number <b>65-0302397</b> Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
7. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent <b>DIERCKS, JEFFREY J 114 S WOODLYNNE AVE TAMPA FL 33609</b>		10. Name and Address of New Registered Agent 81 Name <b>GERARD REEDER</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>5841 N.E. 22ND AVE.</b> 83 84 City <b>FT. LAUDERDALE, FL</b> 85 Zip Code <b>33308</b>	
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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 *Gerard Reeder* **GERARD REEDER PD** **03/24/98**  
(NOTE: Registered Agent Signature Required When Filing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DP SCHOENBAUM, BETTY 5541 GULF OF MEXICO DRIVE E SARASOTA FL</b> <input checked="" type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<b>PD REEDER, GERARD 5841 N.E. 22ND AVE FT. LAUDERDALE, FL 33308</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<b>VD ST. GERMAIN, RANDALL 3200 NE 14TH STREET CAUSEWAY POMPANO BEACH, FL. 33062</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. 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 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: *Gerard Reeder* **GERARD REEDER** **03/24/98** **785 1400** (954)

CP2E034 (10/97)