

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CMRRR # Z 167 562 926

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **V15950 (1)**

1. Corporation Name
FIGHTIN' GATOR AIR INC.



Principal Place of Business: **2101 WEST COMMERCIAL BLVD SUITE 1500 FT LAUDERDALE FL 33309**
Mailing Address: **2101 WEST COMMERCIAL BLVD SUITE 1500 FT LAUDERDALE FL 33309**

3. Date Incorporated or Qualified: **02/21/1992** 3a. Date of Last Report: **05/01/1995**
4. FEI Number: **65-0318997** 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: 21, Suite, Apt. #, etc.: 22, City & State: 23, Zip: 24, Country: 25
2a. Mailing Address: 26, Suite, Apt. #, etc.: 27, City & State: 28, Zip: 29, Country: 30

9. Name and Address of Current Registered Agent

**ELLIOTT, ERIC R
2101 W. COMMERCIAL BLVD., STE. 1500
FT. LAUDERDALE FL 33309**

10. Name and Address of New Registered Agent

81 Name: _____
82 Street Address (P.O. Box Number is Not Acceptable): _____
83 _____
84 City: _____ FL 85 Zip Code: _____

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: _____ (NOTE: Registered Agent signature required when replacing) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITILE	T BARBER, BRUCE C. <input type="checkbox"/> DELETE	1 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2101 W. COMMERCIAL BLVD.	12 NAME	
STREET ADDRESS	FT. LAUDERDALE FL	13 STREET ADDRESS	
CITY- ST- ZIP		14 CITY- ST- ZIP	
TITILE	V BARBER, KAREN E. <input type="checkbox"/> DELETE	2 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2101 W. COMMERCIAL BLVD.	22 NAME	
STREET ADDRESS	FT. LAUDERDALE FL	23 STREET ADDRESS	
CITY- ST- ZIP		24 CITY- ST- ZIP	
TITILE	PS ELLIOTT, ERIC R. <input type="checkbox"/> DELETE	3 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2101 W. COMMERCIAL BLVD.	32 NAME	
STREET ADDRESS	FT. LAUDERDALE FL	33 STREET ADDRESS	
CITY- ST- ZIP		34 CITY- ST- ZIP	
TITILE	<input type="checkbox"/> DELETE	4 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY- ST- ZIP		44 CITY- ST- ZIP	
TITILE	<input type="checkbox"/> DELETE	5 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY- ST- ZIP		54 CITY- ST- ZIP	
TITILE	<input type="checkbox"/> DELETE	6 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY- ST- ZIP		64 CITY- ST- ZIP	

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: *[Signature]* 4/29/96 (954)730-7700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone No.

CR2E034 (12/95)