

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # V18283

(4)

96 MAY 10 PM 4:06

1. Corporation Name

ALANIS AIRPORT SERVICES, INC.

Principal Place of Business

3785 NW 82ND AVE.
#306
MIAMI FL 33166

Mailing Address

3785 NW 82ND AVE.
#306
MIAMI FL 33166

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

25

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

03/03/1992

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0351649

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Trust Fund Contribution

☐

Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,

Florida Statutes

☐ Yes

☐ No

10. Name and Address of New Registered Agent

81. Name

AUGUSTINE O. AJAGBE

82. Street Address (P.O. Box Number is Not Acceptable)

83. 9505 S.W. 136th Str.,

84. City Miami

FL

85. Zip Code 33176

11. Pursuant to the provisions of Sections 607.0506 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 607.0506, Florida Statutes.

SIGNATURE

[Signature]

AUGUSTINE AJAGBE

1/17/96

12. OFFICERS AND DIRECTORS

TITLE	CT	☐ DELETE
NAME	AJAGBE, ADETUTU	
STREET ADDRESS	9505 SW 136 ST	
CITY - ST - ZIP	MIAMI FL 33165	
TITLE	CPS	☐ DELETE
NAME	AJAGBE, AUGUSTINE O.	
STREET ADDRESS	9505 SW 136 ST	
CITY - ST - ZIP	MIAMI FL 33165	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	500001827165
2.1 TITLE	-05/17/96--010000--013
2.2 NAME	****701.25 ****233.75
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ 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 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]

AUGUSTINE AJAGBE

1/17/96

(35) 593-8233

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)