

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90460 043 ***150.00

DOCUMENT # 496425

1. Entity Name

94TH AERO SQUADRON OF MIAMI, INC.

Principal Place of Business

Mailing Address

**4155 E LA PALMA AVE
 SUITE 250
 ANAHEIM CA 92807**

**4155 E LA PALMA AVE
 SUITE 250
 ANAHEIM CA 92807**

2. Principal Place of Business

8191 E. KAISER BLVD

Suite, Apt. #, etc.

3. Mailing Address

8191 E. KAISER BLVD

Suite, Apt. #, etc.

City & State

ANAHEIM, CA

City & State

ANAHEIM, CA

Zip

Country

92808-2214

Zip

Country

92808-2214

4. FEI Number

95-3062764

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

~~THE PRENTICE-HALL CORPORATION SYSTEM INC.~~

**1201 HAYS STREET
 SUITE 105
 TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
DV	TALLICHET, CECILIA	4155 E LA PALMA AVE #250	ANAHEIM CA	<input type="checkbox"/>
PD	TALLICHET, DAVID C., JR.	4155 E LA PALMA AVE #250	ANAHEIM CA	<input type="checkbox"/>
AS	MCMAHON, JUDITH	4155 E LA PALMA AVE #250	ANAHEIM CA	<input type="checkbox"/>
AT	ROYSE, BOB D	4155 E LA PALMA AVE #250	ANAHEIM CA	<input type="checkbox"/>
ST	TALLICHET, CECILIA	4155 E LA PALMA AVE #250	ANAHEIM CA	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
		8191 E. KAISER BLVD	ANAHEIM, CA 92808-2214	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		8191 E. KAISER BLVD	ANAHEIM, CA 92808-2214	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		8191 E. KAISER BLVD	ANAHEIM, CA 92808-2214	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		8191 E. KAISER BLVD	ANAHEIM, CA 92808-2214	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	VP	John D Tallichet	8191 E Kaiser Blvd	<input type="checkbox"/>	<input checked="" type="checkbox"/>
		Anaheim, CA 92808			

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Cecilia Tallichet* **4-25-02** **714-2796100**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)