## **2001 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

## Apr 30, 2001 8:00 am Secretary of State DOCUMENT # F9600003170 1. Entity Name AVIATION SALES COMPANY 04-30-2001 90006 002 \*\*\*150.00 Principal Place of Business Mailing Address 6905 NW 25TH ST 3701 FLAMINGO RD MIRAMAR FL 33027 MIAMI FL 33122 US 2. Principal Place of Business 3. Mailing Address 3601 FLAMINA 360 L FL DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0665658 Mirama MIRAMAR Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired 330Z-33027 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name AMERICAN INFORMATION SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 1 SE 3RD AVE 27TH FLR MIAMI FL 33131 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. DCP ☐ Delete TITLE Change Change ☐ Addition TITLE NAME BAKER, DALE S NAME 3601 FLEMINGO ROUD MICHMAR, FC 33027 STREET ADDRESS STREET ADDRESS 3701 FLAMINGO RD CITY-ST-ZIP CITY-ST-ZIP MIRAMAR FL 33027 Change ☐ Addition ☐ Delete TITLE TITLE WOODY, HAROLD M NAME NAME 3601 Flomingo Road STREET ADDRESS STREET ADDRESS 3701 FLAMINGO RD CITY-ST-7IP MIRAMAN, FL 33027 CITY-ST-ZIP MIRAMAR FL 33027 TITLE ☐ Change ☐ Addition **↓**Delete NAME NAME SASO, MICHAEL A STREET ADDRESS STREET ADDRESS 6905 N.W. 25TH STREET CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33122 TITLE CFO ☐ Delete TITLE ☐ Addition Brant, michael C NAME NAME BRANT, MICHAEL STREET ADDRESS STREET ADDRESS 3701 FLAMINGO RD CITY-ST-ZIP CITY-ST-ZIP MIRAMAR FL 33027 ☐ Change ☐ Delete TIT) F ☐ Addition NAME SCHWARTZ, PHILIP B NAME STREET ADDRESS STREET ADDRESS ONE SE 3RD AVE 28TH FLOOR CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33131 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 eath; 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.