

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 27, 2001 08:00 AM**
Secretary of State**DOCUMENT # F97000000138**1. Entity Name
BECKER AVIONICS, INC.

Principal Place of Business

10830 NW 27TH STREET

MIAMI
33172

FL

Mailing Address

10830 NW 27TH STREET

MIAMI
33172

FL

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

22-2103755

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

KRAMER WILLIAM SESQ
ONE BOCA PLACE, SUITE 411-E
2255 GLADES RD.
BOCA RATON
334317383

FL

US

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 _____ **04/27/2001**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE9. 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, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	DT	☐ Delete
NAME	VINTA GEORGE F	
STREET ADDRESS	255 ALHAMBRA CIRCLE STE 715	
CITY-ST-ZIP	CORAL GABLES FL 33134	
TITLE	DCP	☐ Delete
NAME	BECKER ROLAND	
STREET ADDRESS	10830 NW 27TH STREET	
CITY-ST-ZIP	MIAMI FL 33172	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	VS	☐ Change ☒ Addition
NAME	BUENAVENTURA RIGOL	
STREET ADDRESS	10830 NW 27TH STREET	
CITY-ST-ZIP	MIAMI FL 33172	
TITLE	VS	☒ Change ☐ Addition
NAME	KRAMER WILLIAM S	
STREET ADDRESS	ONE BOCA PALCE, SUITE 411-E 2255 GLADES RD	
CITY-ST-ZIP	BOCA RATON FL 334317383	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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 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: BUENAVENTURA RIGOL

VS

04/27/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)