

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2000 08:00 AM
Secretary of State

DOCUMENT # F99000003306

1. Entity Name
UNICAPITAL AIRCRAFT ENGINE GROUP, INC.

Principal Place of Business 10800 BISCAYNE BLVD., LAW DEPT. C/O UNICAPITAL CORP. MIAMI FL 33161	Mailing Address 10800 BISCAYNE BLVD., LAW DEPT. C/O UNICAPITAL CORP. MIAMI FL 33161
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2. Principal Place of Business 10800 BISCAYNE BLVD., LAW DEPT.	3. Mailing Address 10800 BISCAYNE BLVD., LAW DEPT.
Suite, Apt. #, etc. C/O UNICAPITAL CORP., SUITE 800	Suite, Apt. #, etc. C/O UNICAPITAL CORP., SUITE 800

City & State MIAMI FL	City & State MIAMI FL
Zip 33161	Country US

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0852929	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324 US**

7. Name and Address of New Registered Agent

Name
SKYWATCH REGISTERED AGENTS, INC.
 Street Address (P.O. Box Number is Not Acceptable)
**10800 BISCAYNE BLVD., LAW DEPT.
 SUITE 800
 MIAMI FL 33161**

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 **JANINE E. COX, ASST. SECRETARY** DATE **04/26/2000**
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 Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GILES RICHARD 10800 BISCAYNE BLVD., LAW DEPT. MIAMI FL 33161 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CHAIT DANIEL 10800 BISCAYNE BLVD., LAW DEPT. MIAMI FL 33161 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CCEO FIORENZA RANDALL P 10800 BISCAYNE BLVD., LAW DEPT. MIAMI FL 33161 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO KNEFF JAMES K 10800 BISCAYNE BLVD., LAW DEPT. MIAMI FL 33161 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT NEW JONATHAN 10800 BISCAYNE BLVD., LAW DEPT. MIAMI FL 33161 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD NEW ROBERT J 10800 BISCAYNE BLVD., LAW DEPT. MIAMI FL 33161 <input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GILES RICHARD 33 BLEEKER STREET MILLBURN NJ 07041 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVS KALB MARTIN 10800 BISCAYNE BLVD., SUITE 800 MIAMI FL 33161 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V VORRATH DAVID 10800 BISCAYNE BLVD., SUITE 800 MIAMI FL 33161 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CHAIT DANIEL 10800 BISCAYNE BLVD., SUITE 800 MIAMI FL 33161 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT NEW JONATHAN 10800 BISCAYNE BLVD., SUITE 800 MIAMI FL 33161 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPD NEW ROBERT J 10800 BISCAYNE BLVD., SUITE 800 MIAMI FL 33161 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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: MARTIN KALB DATE: 04/26/2000

C. DERYL COUCH, ASST. SECRETARY
10800 BISCAYNE BLVD., SUITE 800

MIAMI, FL 33161

TERI M. TRIMMER, ASST. SECRETARY
10800 BISCAYNE BLVD., SUITE 800

MIAMI, FL 33161