FILE NOW: FILING FEE AFTER MAY 1 IS \$55

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMEN

F STATE Sandra B. Mor

Secretary of S

DIVISION OF CORPO SMOIT

DOCUMENT # H89721

(5)

Mailing Address

BOCA NATIONAL AIRCRAFT, INC.

FILED Apr 18 1997 8:00am Secretary of State



% JOSEPH M. ORZECK 3128 NW 63RD ST BOCA RATON FL 33496		% JOSEPH M. ORZECK 3128 NW 63RD ST BOCA RATON FL 33496					
					 Date Incorporated or Qualified 12/12/1985 	3a. Date of Last 02/08/1996	Report
2. Principal Pi	iace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	I A	pplied For
21		26			59-2622540	/ N	lot Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			CO 7E	Additional
22		27	27		5. Certificate of Status Desired	Fee R	tequired
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00	May Be
23		28	28		Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Country		8. This corporation has liability for in	ntangible tax under	s. 199.032,
24	25 29 30		30	Florida Statutes			
9, Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
ORZ	ÆCK, JOSEPH M.		1	Name			
	8 NW 63RD ST CA RATON FL 33496		82 Street Addr		dress (P.O. Box Number is Not Acceptable)		
800	A RATUN FL 33490		Ī	13			
				M City		[a=1 a:	0-1-
				City		FL 85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutos, 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 607.0505, Florida Statutes.							
SIGNATURE Signature, typod or printed name of registered agent and like if applicable (NOTE Registered Agent's gnature required whon reinstating) DATE							
12.	OFFICE	ERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	RS IN 12
TITLE	DP	DELETE	DELETE 1.1 TITL			Change	☐ Addition 2
NAME	ORZECK, JOSEPH M.	1.2 N		E			13
STREET ADDRESS	3128 NW 63RD ST		1.3 STREET ADDRESS				}
CITY-ST-ZIP	BOCA RATON FL 1.		1.4 CITY	-ST-ZIP			į
TITLE	ST DE		2.1 TITLE		,	Change	☐ Addition C
NAME	ORZECK, VALERIE		2.2 NA				
STREET ADDRESS	31287 NW 63RD ST		2.3 STRI	E1 ADDRESS			
CITY-ST-ZIP	BOCA RATON,F L.		2. 4 C(1)				
TITLE		☐ DELETE				Change	☐ Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3.51R	ET ADDRESS			
CITY-ST-ZIP				(-ST-ZIP			
TITLE		DELETE	4.1 7171			☐ Change	Addition
NAME			4. 2 NAM	- 1			
STREET ADDRESS			B	ET ADDRESS			
CITY-ST-ZIP				- ST - ZIP	•		
TITLE		DELETE	5.1 TITL			☐ Change	Addition
NAME		-	5.2 NAM	1			
STREET ADDRESS				ET ADDRESS	•		
CITY-ST-ZIP							
TITLE		DELETE	6.1 TITU	- S1 - ZIP		Change	Addition
		L. Octob				L Vinality	CT VOIIION
NAME OTREET ARROSES			6.2 NAM				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP	w partifu that the information	amplied with this filler, does not any	64 IY	- ST- ZIP	ad in Section 110.07/3//). Elevide Statutes	16.00	