

**FILED**  
**Jun 18, 1999 8:00 am**  
**Secretary of State**

06-18-1999 90010 019 \*\*\*150.00

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1999</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # M15605**
 1. Corporation Name  
**AEROCAR AVIATION CORP.**

## Principal Place of Business

 % MICHAEL ROSENBERG  
 1500 SAN REMO AVE., #125  
 CORAL GABLES FL 33146

## Mailing Address

 % MICHAEL ROSENBERG  
 1500 SAN REMO AVE., #125  
 CORAL GABLES FL 33146


DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>1100 International Pkwy</b> Suite, Apt. #, etc. 22 _____ City & State 23 <b>Sunrise, FL</b> Zip Country 24 <b>33323</b> 25 <b>US</b>		2a. Mailing Address 26 <b>1100 International Pkwy</b> Suite, Apt. #, etc. 27 _____ City & State 28 <b>Sunrise, FL</b> Zip Country 29 <b>33323</b> 30 <b>US</b>		3. Date Incorporated or Qualified <b>05/16/1985</b>	
		4. FEI Number <b>59-2532938</b>		Applied For <input type="checkbox"/> Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
		8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No			
9. Name and Address of Current Registered Agent <b>ATRIUM REGISTERED AGENTS, INC.</b> <b>1500 SAN REMO AVENUE</b> <b>SUITE 125</b> <b>CORAL GABLES FL 33146</b>			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 _____ 84 City <b>FL</b> 85 Zip Code		

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, 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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PST	1.1 TITLE	D/P
NAME	SHASHUA, CARMEL	1.2 NAME	Nedivi, Zivi R.
STREET ADDRESS	1495 N PARK DR	1.3 STREET ADDRESS	1100 International Pkwy
CITY-ST-ZIP	WESTON FL	1.4 CITY-ST-ZIP	Sunrise, FL 33323
TITLE	VP	2.1 TITLE	
NAME	SHAIL, SHAUL	2.2 NAME	Gleason, John S.
STREET ADDRESS	1495 N PARK DR	2.3 STREET ADDRESS	1100 International Pkwy
CITY-ST-ZIP	WESTON FL	2.4 CITY-ST-ZIP	Sunrise, FL 33323
TITLE	VP	3.1 TITLE	V.P.
NAME	SHASHUA, ROSA	3.2 NAME	Wallace, Michael W.
STREET ADDRESS	1111 S SOUTHLAKE DR	3.3 STREET ADDRESS	1100 International Pkwy
CITY-ST-ZIP	HOLLYWOOD FL	3.4 CITY-ST-ZIP	Sunrise, FL 33323
TITLE	VP	4.1 TITLE	S
NAME	HARTENHOFF, GREGORY A	4.2 NAME	Motisi, Anthony
STREET ADDRESS	1495 N PARK DR	4.3 STREET ADDRESS	1100 International Pkwy
CITY-ST-ZIP	WESTON FL 33326	4.4 CITY-ST-ZIP	Sunrise, FL 33323
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)



M15605  
594/46-90020-2

July 13, 1999

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: Aerocar Aviation, Corp. Reference # M15605

To Whom It May Concern:

In response to your notice dated June 21, advising that the 1999 Florida Annual Report for Aerocar Aviation, Corp. has been received, but not filed due to a pending \$400 balance, please note that this form was inadvertently filed after its due date.

The pre-printed Florida Annual Report form was originally mailed to its prior location (Kellstrom Industries, Inc. acquired Aerocar Aviation, Corp. in 1998), thereby delaying our receipt of the form until after May 1<sup>st</sup>. However, once we received the notice, we promptly filed the annual report with the \$150 fee.

In addition, the annual report does include the name and address of our current registered agent:

Atrium Registered Agents, Inc.  
1500 San Remo Avenue, Suite 125  
Coral Gables, FL 33146

As such, we respectfully request that you abate the \$400 penalty related to the untimely filing of the 1999 Florida Annual Report.

Should you have any questions, please do not hesitate to contact me at (954) 858-2098.

Sincerely,

Olga M. Castells, CPA  
Manager of Corporate Tax

Enclosure