2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

DOCUMENT # M34108 1. Entity Name MARIS WORDEN AEROSPACE, INC.					FILED Jul 18, 2000 8:00 am Secretary of State 07-18-2000 90011 011 ***550.00			
Principal Plac	e of Business	Mailing Address						
60 MARINER BEACH LANE VERO BEACH FL 32963 US P.O. BOX 8065 VERO BEACH FL 32963 US) (88 /88)) (88	OL COLL DIANT ALBERT AFAIL DE	INII 87871 NIAI7 1881	
 Principal P ZZZ 	lace of Business N. CARMEC CORPS	. Mailing Address						
Suite, Apt. #, etc. Suite, Apt. #, etc.					DO NOT WRITE IN THIS SPACE			
City & State	BEACH, FL	City & State		4.	FEI Number 59-26890	00	Applied For Not Applicable	
32963	Country	ZipCountry		5.	5. Certificate of Status Desired \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent			Name	7. Name and Address of New Registered Agent				
FIEMING HAILE & SHAW DA								
11760 US HWY. 1, #300 N.PALM BCH. FL 33408			Street Ad	Street Address (P.O. Box Number is Not Acceptable)				
			City			FL Zip	Code	
8. The above	named entity submits this statement for t	he purpose of changing its reg	istered office or r	egistered ag	gent, or both, in the State of F	orida.		
SIGNATURE .	Signature, typed or printed name of registered agent and	d title if applicable. (NOTE: Re	gistered Agent signature	e required when r	reinstating)	DATE	<u></u>	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! FEE I After SEPTEMBER 13, 2000 I Make Check Payable to De			000 Min. will b	e \$750.00	10. Election Campaign Fi Trust Fund Contribution		55.00 May Be	
11.	OFFICERS AND D	RECTORS	12.	Αſ	DDITIONS/CHANGES TO OF	FICERS AND DIREC	TORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD WORDEN, ALFRED M. 60 MARINER BEACH LANE VERO BEACH FL 32963	☐ Delete	TITLE NAME Street address City-St-Zip	ZZZ VERO	N. CARMEL C BEACH, FL	. D€ha Bou.RT 32963	inge	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCT MARIS, JOHN M. 60 MARINER BEACH LANE VERO BEACH FL 32963	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		A. CARMEC C BEACH, FL	Æ Cha	inge Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	•• v.	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Cha	inge [] Addition	
13. I hereby o	ertify that the information supplied with the on this report or supplemental report is transfer or the receiver or trustee empoyor or on an attachment with an appreciation of the receiver or trustee.	ue and accurate and that my s	e exemption state	ve the same	legal effect as if made under	oath: that I am an of	ficer or director	