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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

FILED

Jan 23, 1999 8:00am

Secretary of State

01-23-1999 90053 011 ***150.00

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9200007452

SIGNATURE

HELICOPTER STRUCTURAL & MAINTENANCE, INC.

Principal Place of Business Mailing Address							.,, 96,14 :694) 616	81 61116 1161 1861	
4241 BIRDSONG BLVD. 4241 BIRDSONG BLVD.									
LUTZ FL 33549 LUTZ FL 33549									
US		US				DO NOT WRITE IN TH	IS SPACE		
ı						3. Date Incorporated or Qualifed 11/24/1992			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	Ι Α	pplied For	
21 26						59-3152550	Not Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc.				·		5 Certifcate of Status Desired	\$8.75	Additional	
22 27						5. Certifcate of Status Desired	Fee F	Required	
City & State City & State						6. Election Campaign Financing	\$5.00	May Be	
23		28				Trust Fund Contribution		l to Fees	
Zip	Country Zip Cou			ntry	8. This corporation owes the current year Intangible				
24	25	29	30			Personal Property Tax.	¥Yes	_JNo	
Name and Address of Current Registered Agent						10. Name and Address of New Registere	d Agent		
204	AMED CHARLES W	· · · · · · · · · · · · · · · · · · ·		81 !	Name			İ	
BRAMMER, CHARLES W				82 5	Street Addres	Address (P.O. Box Number is Not Acceptable)			
1211 BIRDONA BETS.				~ `	Oli Col Addice	Sa (1.0. Dox Humber is Not Acceptable)		N 2 12 14 14 16 16 16 16 16 16 16 16 16 16 16 16 16	
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			-	24	a :	<u> </u>			
				84 (City	F	85 Zip	Code	
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statute	s, the ab	ove-n	named corpor	ation submits this statement for the purpose	of changing it	s registered	
office or r	egistered agent, or both, in the State of	of Florida. Such change was au	thorized	by the	e corporation	's board of directors. I hereby accept the app	ointment as r	egistered	
	in familiar with, and accept the obligat	ions of, Section 607.0505, Fioi	iua statu	ies.					
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE:	Registered A	Apent sid	gnature required w	then reinstating) DATE		-}:	
12.	OFFICERS AN		13.	2	3 · · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	ORS IN 12	
TITLE	PTD	☐ DELETE	1.1 TITL	 .E		. *	Change		
NAME	BRAMMER, CHARLES W.		1.2 NA	ИE					
STREET ADDRESS	4241 BIRDSONG BLVD.			REETAD	YDRESS				
CITY-ST-ZIP	LUTZ FL			Y-ST-Z					
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	4241 BIRDSONG BLVD.				NODECC .				
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NAME			5.2 NAM						
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CITY-ST-ZIP			5.4 CIT	Y-ST-ZI	IP	· · ·			
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NAME			6.2 NAM	Æ					
	1.11				MRESS				

14. I hereby certify that the information supplied with this filling 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 chapter 607, provided that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, and the Block 14 or Bl

6.4 CITY-ST-ZIP