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Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1997**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000055688 (1)**

1. Corporation Name
HEICO AVIATION PRODUCTS CORP.

Principal Place of Business	Mailing Address
C/O HEICO CORPORATION 3000 TAFT STREET HOLLWOOD FL 33021	C/O HEICO CORPORATION 3000 TAFT STREET HOLLWOOD FL 33021-4441

3. Date Incorporated or Qualified: 06/28/1996
3a. Date of Last Report:

2. Principal Place of Business — 21 | Suite, Apt. #, etc — 22 | City & State — 23 | Zip — 24 | Country — 25

2a. Mailing Address — 26 | Suite, Apt. #, etc. — 27 | City & State — 28 | Zip — 29 | Country — 30

4. FEI Number: 65-0680321 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

MENDELSON, VICTOR H ESQ.
3000 TAFT STREET
HOLLWOOD FL 33021

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number Is Not Acceptable)
83
84 City FL 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	D ☐ DELETE	1.1 TITLE	DP ☒ Change ☐ Addition
NAME	MENDELSON, VICTOR H ESQ.	1.2 NAME	Mendelson, Victor H.
STREET ADDRESS	3000 TAFT STREET	1.3 STREET ADDRESS	3000 Taft Street
CITY-ST-ZIP	HOLLWOOD FL 33021	1.4 CITY-ST-ZIP	Hollywood, FL 33021
TITLE	☐ DELETE	2.1 TITLE	DC ☐ Change ☒ Addition
NAME		2.2 NAME	Mendelson, Laurans A.
STREET ADDRESS		2.3 STREET ADDRESS	3000 Taft Street
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Hollywood, FL 33021
TITLE	☐ DELETE	3.1 TITLE	DT ☐ Change ☒ Addition
NAME		3.2 NAME	Irwin, Thomas S.
STREET ADDRESS		3.3 STREET ADDRESS	3000 Taft Street
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Hollywood, FL 33021
TITLE	☐ DELETE	4.1 TITLE	S ☐ Change ☒ Addition
NAME		4.2 NAME	Vetter, Judith
STREET ADDRESS		4.3 STREET ADDRESS	3000 Taft Street
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Hollywood, FL 33021
TITLE	☐ DELETE	5.1 TITLE	D ☐ Change ☒ Addition
NAME		5.2 NAME	Reum, James L.
STREET ADDRESS		5.3 STREET ADDRESS	3000 Taft Street
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Hollywood, FL 33021
TITLE	☐ DELETE	6.1 TITLE	D ☐ Change ☒ Addition
NAME		6.2 NAME	Mendelson, Eric A.
STREET ADDRESS		6.3 STREET ADDRESS	3000 Taft Street
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Hollywood, FL 33021

CR2E034 (9/96)

14. I do 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

SIGNATURE: [signature] 4/15/97 954-987-4000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Victor H. Mendelson

0131125