FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

C/O HEICO CORPORATION

3000 TAFT STREET

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

C/O HEICO CORPORATION 5000 TAFT STREET

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

Apr 30 1997 8:00am

Secretary of State

954-987-4000

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DOCUMENT	# PS	6000	0556	88	(1)

HEICO AVIATION PRODUCTS CORP.

HOLLWOOD FL 33021 HOLLWOOD FL 33021-4441 Sa. Date of Last Report 3. Date Incorporated or Qualified 06/28/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0680321 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, eld \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required 22 City & State City & State 6. Election Campaign Financing **\$5.00** May Be 28 Trust Fund Contribution Added to Fees 23 Ζip Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 🗶 Yes 🗌 No 29 30 Florida Statutes 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MENDELSON, VICTOR H ESQ. 3000 TAFT STREET Street Address (P.O. Box Number is Not Acceptable) HOLLWOOD FL 33021 83 84 Zin 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. Stgruture, typed or printed man a of registered agont and little d'applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS (96/6) 13, DELETE Change Addition 1.1 TITLE HILE mendelson, Viotor H. MENDELSON, VICTOR H ESQ. NAME 1.2 NAME 3000 TAFT STREET STREET ADDRESS 1.3 STREET ADORESS HOLLWOOD FL 33021 Hollywood, PL 33021 City - St - 7IF 1.4 City-ST-ZiP DELETE Change Addition 2.1 TITLE THUE Pc mendelson, Laurans A. 2.2 NAME 2000 Taft Street 2.3 STREET ADDRESS STREET ACIDRESS CITY-ST 2.4 City-ST-ZIP Hollywood, FL \$3001 I Change DELETE Addition TITLE 3.1 TITLE Irwin, Thomas & NAME 3.2 NAME 2000 TOUT + Street 3 3 STREET ADDRESS STREET ADDRESS CITY - \$1 - 7/P 3.4. CITY - ST-ZIP 8#021 Addition DELETE ☐ Change 4.1 TITLE THEF Vetter, Judith 4.2 NAME NAME Taft Street STREET ADDRESS 43 STREET ADDRESS Hollywood, FL Broad CHY-ST ZIF 4.4 CITY - ST - ZIP DELETE ☐ Change Addition 5.1 TITLE TITLE 5.2 NAME Leum, James L NAMÉ **5.3 STREET ADDRESS** 3000 Taff Street STREET ADDRESS Cily - \$1 - 205 5.4 CITY - ST - ZIP Hollywood FL BBODI DELETE 6.1 TITLE Addition TIL.F 62 NAME mendelson, Fric A. NAME 3000 TAFT street 6.3 STREET ADDRESS STREET ADDRESS 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or \$1.1\text{k-10} (change) or on an attachment with an address