May 13, 2008 8:00 am Secretary of State 2008 FOR PROFIT CORPORATION . . ANNUAL REPORT 05-13-2008 90012 005 ***150.00 DOCUMENT # P98000097520 1. Entity Name ROGERS-DIERKS, INC. 461020--Principal Place of Business Mailing Address C/O HEICO CORPORATION C/O HEICO CORPORATION 3000 TAFT STREET 3000 TAFT STREET HOLLYWOOD, FL 33021 HOLLYWOOD, FL 33021 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03262008 CR2E034 (12/06) Chg-P City & State City & State 4. FEI Number Applied For 58-2428936 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MENDELSON, VICTOR H ESQ. Street Address (P.O. Box Number is Not Acceptable) 3000 TAFT STREET HOLLYWOOD, FL 33021 City Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registation) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Change **Addition** VETTER, JUDITH W M'QUEREY, BRUCE NAME NAME 3000 THAT STREET STREET ADDRESS 3000 TAFT STREET STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33021 CITY-ST-ZIP 33021 HOLLYWOOD, FL TITLE Delete IIILE ☐ Change ☐ Addition KELLY, KEVIN NAME NAME 3000 TAFT STREET STREET ADDRESS STREET ADDRESS CITY-ST-7/P HOŁLYWOÓR, FL 33021 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME LETENDRE, ELIZABETH R NAME STREET ADDRESS 3000 TAFT STREET STREET ADDRESS HOLLYWOOD, FL 33021 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition IRWN, THOMAS S NAME NAME STREET ADDRESS 3000 TAFT STREET STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33021 CITY-ST-ZIP TITLE Addition TITLE ☐ Delete ☐ Channe NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CHTY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 it changed, or on an attachment with an address, with all chempowered.

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

FILED