

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 21, 2001 8:00 am
Secretary of State

03-21-2001 90011 030 ***150.00

DOCUMENT # P99000024111

1. Entity Name
GOLDCOAST AVIATION TOOL CORPORATION

Principal Place of Business 3690 NW 102ND AVE. CORAL SPRINGS FL 33065	Mailing Address 10650 W SAMPLE RD. CORAL SPRINGS FL 33065
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C0035921



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 4688 N.W. 22ND STREET	3. Mailing Address 4688 N.W. 22ND STREET
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State COCONUT CREEK FL	City & State COCONUT CREEK FL
Zip 33063	Country BROWARD
Zip 33063	Country BROWARD

4. FEI Number 65-0904760	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
WEISSMAN, ASHER
10650 W. SAMPLE RD.
CORAL SPRINGS FL 33065

7. Name and Address of New Registered Agent
 Name **WEISSMAN ASHER**
 Street Address (P.O. Box Number is Not Accepted)
4688 N.W. 22 STREET
 City **COCONUT CREEK** FL Zip Code **33063**

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.
 SIGNATURE DATE **3/17/01**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVSD <input checked="" type="checkbox"/> Delete WEISSMAN, ASHER 10650 W. SAMPLE RD. CORAL SPRINGS FL 33065
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVSD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition WEISSMAN ASHER 4688 N.W. 22ND STREET COCONUT CREEK FL- 33063
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DATE **3/17/01** Daytime Phone **954-974-0018**

CR2E034 (10/00)