

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED
AND
FILED

95 JUL -6 PM 3:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT



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

1995

AMENDED

DOCUMENT # 213640

1. Corporation Name

AERONAUTICAL ENGINEERS, INC.

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

07/09/58

3a. Date of Last Report

01/19/94

2. Principal Place of Business

21 7765 N.W. 54 Street

2a. Mailing Address

26 P.O. Box 661027

4. FEI Number

59-0837487

Applied For

Not Applicable

22 Suite/Apt. #, etc.

Suite/Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

23 City & State

Miami, Florida

27 City & State

Miami, Florida

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

24 Zip

33166-4737

Country

Dade

29 Zip

33166

Country

Dade

7. This corporation has liability for intangible tax under S. 193.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

David M. McDonald, Esq.

82 Street Address (P.O. Box Number is Not Acceptable)

c/o McDonald & McDonald

83

1393 S.W. 1st Street, Suite 200

84 City

Miami

FL

85

Zip Code
33135

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

David M. McDonald

Signature, typed or printed name of registered agent and the if applicable

(NOTE: Registered Agent signature required when reappointing)

6/5/95

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE President, Director, Secretary
NAME Barry Voight
STREET ADDRESS 7765 N.W. 54 Street
CITY- ST- ZIP Miami, FL 33166-4737

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE Vice President, Director, Treasurer
NAME Charles Brasher
STREET ADDRESS 7765 N.W. 54 Street
CITY- ST- ZIP Miami, FL 33166-4737

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

800001533000
-07/10/95--01010--019
*****61.25 *****61.25

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information included 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, changed, or on an attachment with an address.

SIGNATURE:

Charles H. Brasher

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/7/95

(305) 574-5802