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

PROFIT CORPORATION ANNUAL REPORT

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1997 DOCUMENT # 567145

(8)

PALM BEACH AVIONICS, INC.

Principal Place 3950 AIBPORT BOCA RATOR	PRO.	Mailing Address 3950 AIRPORT RD. BOC. RATON FL 33431-643	2		
				 Date Incorporated or Qualified 03/29/1978 	3a. Date of Last Report 02/20/1996
	lace of Business	2a. Mailing Address	^^37	4. FEI Number	Applied For
21 1 550 Suite, Apt.	Aviation Blvd.	26 P.O. 80× 3 Suite, Apt. #, etc.	2431	59-1809339	Not Applicable
22 ~	π, οιο	27 —		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	6	City & State		6. Election Campaign Financing	\$5.00 May Be
	Palm Beach		ch Garden	Trust Fund Contribution	Added to Fees
Zp 	Country	Zip	Country	8. This corporation has liability for	
24 334	9. Name and Address of Current		10 USA	Florida Statutes 13 10, Name and Address of New Re	Yes No
COC	OK, JIMMY D.		81 Name		
	O AIRPORT RD.		1 10001	K, Jimmy D. kiress (P.O. Box Number is Not Acceptab	No.
,			1155	PAVIOTION BIVE	
BOC	CA RATON FL 33431		83		
			84 City	st Palm Beach	85 Zip Code
			I I Wine 6	st rain beach	FI
	10-10-007-007	0 1 CO7 4500 Florida Olah 4			
11. Pursuant l	to the provisions of Sections 607.0502 egistered agent, or both, in the State	2 and 607.1508, Florida Statutes of Florida Such change was au	the above-named co	proporation submits this statement for the pration's board of directors. I hereby accept	ourpose of changing its registered of the appointment as registered
7.	to the provisions of Sections 607 0502 egistered agent, or both, in the State of familiar with, and accept the obliga	2 and 607.1508, Florida Statutes of Florida Such change was au alid is of Tection 607.0505, Flori	the above-named co thorized by the corporada Statutes.	proporation submits this statement for the pration's board of directors. I hereby accept	ourpose of changing its registered of the appointment as registered
11, Pursuant (office or re agent. Lat	to the provisions of Sections 607 0502 egistered agent, or both, in the State of familiar with, and a cept the obligationally. Typed or procedume of registered agent	0 / C	s, the above-named co thorized by the corpor- da Statutes. Registered Agent signature req	orporation submits this statement for the pration's board of directors. I hereby accept	purpose of changing its registered of the appointment as registered
7.	Xxxxx D. Co.	nt and title if applicable. (NOTE: D DIRECTORS	, the above-named co thorized by the corpor da Statutes.	orporation submits this statement for the pration's board of directors. I hereby accept	DATE CERS AND DIRECTORS IN 12
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6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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.

561-625-6690

FILED

Feb 26 1997 8:00am

Secretary of State