P.03/04 / Ox

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OI.	CACE	DEAD ALL	INSTRUCTIONS BEFORE COMPLETING THIS FORM	ł
٣L		READ ALL	1142 I RUC HONS BEFORE COMPLETING THIS FORM	۶.

			OFFICE OF ATT	. 7	F ILED		
COR	RPORATION (FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		OI SEP 2.7 AM 8: 12 SECRETARY OF STATE TALLAHASSEE, FLORIDA		
DOCL	JMENT # F00000		SIGN OF CORPORATIONS				
1. Corpora	tion Name	·		\(\frac{1}{2}\)			
	Aircraft i	Financia	1 Services In	K. 18			
2. Principal	Office Address		ffice Address				
Suite, Apt. #	17 Kane Concou		1177 Kane Concouse		OI URR		
· :	nthouse	Pent	Penthouse		rporated or Qualified 1985		
City & State		City & State	City & State		<u> </u>		
Bay 1	Harbor Island Country	s Kay Ha	lbor Islands		er 58/723709 Applied For Not Applied For		
T F	33184	T. FL	33154	6. CERTIFICAT	TE OF STATUS DESIRED 🔲		
		7. Na	me and Address of Current Regis	tered Agent		1	
	Name CT Cort	poration			100004623831	- F	
	Street Address (P.O. Box Numb	ber is Not Acceptable)	2 [-10/04/010106 - 019	~~	
	Suite, Apt. #, Etc.	ne Island I	2d		****150.80 *****158.0	3U	
*,	Plantation	<u> </u>			State Zip Code FL 33324		
B. I, being a			ation, am familiar with and accept the	obligations of section			
Signature of Registered /		REGISTERED AG	UNU SPECIAL ASSIS	A A. BURKE TANT SECRETA	URY Date 9-26.01		
9. Names a	nd Street Addresses of Each Offi	icer and/or Director (Flori	da nonprofit corporations must list at l	ieast 3 directora)			
Titles	Name of Officers and/or D	Xrectors	Street Address of E Officer and/or Direc	ach clor	City / State / Zip		
PSTD	Luis Fernando Esteba		8 N. 6th st. (10-20 Bldg.)		Renton, WA 98055	_	
VP	Silvia Horvi	ath	20 Island Ave. #	608	Miani Beach, R. 33139	,	
ASD	antonio De Co		16572 SW 395	†.	Mirimar, PL 33027		
			···-				
				`			
10. I certify	that I am an officer or director or t	the receiver or trustee en	npowered to execute this application a	s provided for in the	soler 807 or 617. F.S. I further certify that when filling		
OMEG D	<i>i</i> une comportation nave deen daid e	and the names of Individu	eliminated, the corporate name satistical listed on this form do not qualify for we the same legal effect as if made un	e an avametica unda	opter 607 or 617, F.S. I further certify that when filing is of section 607.0401 or 617.0401, F.S. that all fees ar section 119.07(3)(I), F.S. The information indicated		
SIGNAT	URE SIGNATURE AND TYPE	D OR PRINTED NAME OF S	ANTONIO O	E CORRA	08/31/0/ 35-844455	-	

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Aircraft Financial Services, Inc. 1177 Kane Concourse Penthouse Bay Harbor Islands, FL 33154

Ph: 305-864-4555 Fax: 305-861-0104

To: Carol

Division of Corporations

Fr: Anna Escandell

Aircraft Financial Services, Inc. Re: Corporate Reinstatement

Dear Carol,

Thank you for your help during our phone conversation on 9/25/01. As per our conversation, I have included this letter, which explains that the reason our corporation did not turn in the annual report is because the address on file is incorrect. We never received any renewal information, which is why we never renewed. The state of Delaware did send us their renewal notice to this address, which is why it was paid and renewed. As you explained on the phone, we are sending \$150.00 for reinstatement because of the address problem and it will only be allowed this one time. I appreciate your willingness to help and your expertise on the situation. You made a stressful morning much easier to handle and I wanted to thank you for your effort. Please feel free to call with any questions or comments you may have.

Sincerely,

Anna Escandell