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

RROFIT \* CORPORATION ANNUAL REPORT

<del>1096</del> 1997

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

F93000000357 (4) DOCUMENT #

AVIATION SYSTEMS, LTD., INC.  $\Psi_{i}^{p}$  or Ш Principal Place of Business Mailing Address 1377 CLINT MOORE ROAD PO BOX 3020 **BOCA RATON FL 33487** BOCA RATON FL 33431-0920 3a. Date of Last Report 3. Date incorporated or Qualified 07/10/1995 01/14/1993 4. FEI Number 2. Principal Place of Business Applied For 2a. Mailing Address 21 36-3038498 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired **t**h Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zio Country 8. This corporation has liability for intangible tax under s 199.032, 24 25 30 Florida Statutes NO Yes INO 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET 83 SUITE 105 TALLAHASSEE FL 32301 84 City 85 Zlp Code 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 Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE Change 1 1 TITLE RAYMAN, LAWRENCE rayman, lawrence NAME 1.2 NAME 1377 CLINT MOORE ROAD STREET ADDRESS 1377 CLINT MOORE ROAD 1.3 STREET ADDRESS BOCA RATON, FL 33487 BOCA RATON, FL 33487 1.4 CITY - ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ŝD ☐ DELETE 2.1 TITLE Change RAYMAN, BIRGITTA NAME 2.2 NAME STREET ADDRESS 1377 CLINT MOORE ROAD 2.3 STREET ADDRESS CITY-ST-ZIP BOCA RATON FL 33487 2.4 CITY - ST - ZIP Addition DELETE TITLE 3.1 TITLE ☐ Change NAME 3.2 NAME BECK, LOUIS S 2300 CORPORATE BLUD NW STREET ADDRESS 3.3. STREET ADDRESS BOCA RATON FL CITY-ST-ZIF 3.4 CITY-ST-ZIP Addition TITLE ☐ DELETE 4. 1 TITLE Change NAME 4 2 NAME TRAPILA WAHTS 1377 CLINT MOORE ROAD STREET ADDRESS 4.3 STREET ADDRESS BOCA RATON, FL 33487 CITY-ST-ZIP 4.4 CITY-ST-ZIP Addition TITLE ☐ DELETE 5. 1 TITLE 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** 5 4 CITY-ST-ZIP CITY - ST - ZIP TITLE ☐ DELETE 6. 1 TITLE Change ☐ Addition 200002201532 NAME 6.2 NAME -06/04/97--01069--015

14. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 cath; 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 changes for or an attac. In that I am an officer or 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

SIGNATURE:

STREET ADDRESS

CITY - ST - ZIP

AWRENCE RAYMAN

**6.3 STREET ADDRESS** 

6.4 CITY-ST-ZIP

5/16/97

\*\*\*173.75

**FILED** 

May 21 1997 8:00am

Secretary of State

(541) 241-9599