

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 27, 1999 8:00 am
Secretary of State

04-27-1999 90129 019 ***150.00

DOCUMENT # F95000003708

1. Corporation Name

DALLAS AEROSPACE, INC.

Principal Place of Business

1875 N INTERSTATE 35 E
CARROLLTON TX 75006

Mailing Address

45025 AVIATION DRIVE
SUITE 300
DULLES VA 20166-7556

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/01/1995

4. FEI Number

75-1609331

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 DALLAS

29 30 20166-7556

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

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

83

84 City

85 Zip Code

FL

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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PCD ☒ DELETE

NAME SCHULZ, HERMAN
STREET ADDRESS 1875 N INTERSTATE 35 E
CITY-ST-ZIP CARROLLTON TX 75006

11 TITLE ☐ Change ☒ Addition

12 NAME William Thompson
13 STREET ADDRESS 1875 N. Interstate 35 East
14 CITY-ST-ZIP CARROLLTON, TX 75006

TITLE VD ☐ DELETE

NAME PERSAVICH, WARREN
STREET ADDRESS 45025 AVIATION DRIVE SUITE 300
CITY-ST-ZIP DULLES VA 20166-7556

21 TITLE ☒ Change ☐ Addition

22 NAME V
23 STREET ADDRESS
24 CITY-ST-ZIP

TITLE VS ☒ DELETE

NAME JORRS, EUGENE W
STREET ADDRESS 45025 AVIATION DRIVE SUITE 300
CITY-ST-ZIP DULLES VA 20166-7556

31 TITLE ☒ Change ☐ Addition

32 NAME V/D
33 STREET ADDRESS JORIS W. Eugene
34 CITY-ST-ZIP 45025 Aviation Dr. Ste 300
DULLES, VA 20166-7556

TITLE CFOD ☐ DELETE

NAME GOODNIGHT, TERRY
STREET ADDRESS 1875 N. INTERSTATE 35 E
CITY-ST-ZIP CARROLLTON TX 75006

41 TITLE ☐ Change ☐ Addition

42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE Y ☐ DELETE

NAME LOUGH, BRADLEY T
STREET ADDRESS 45025 AVIATION DRIVE SUITE 300
CITY-ST-ZIP DULLES VA 20166-7556

51 TITLE ☒ Change ☐ Addition

52 NAME T/SID
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

61 TITLE ☐ Change ☒ Addition

62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bradley T. Lough

Date

Daytime Phone #

(703) 478-5908

CR2E034 (11/98)