

4-13-98 B-4478 -C
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FILED
Apr 13 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F96000000273 (0)

1. Corporation Name

KELLSTROM INDUSTRIES, INC.

Principal Place of Business

14000 N.W. FOURTH STREET
SUNRISE FL 33325

Mailing Address

14000 N.W. FOURTH STREET
SUNRISE FL 33325

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/12/1996

4. FEI Number

13-3753725

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 or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

9. Name and Address of Current Registered Agent

BAYNE, SHAWN
% STEARNS, WEAVER, MILLER, WEISSLER ETAL
200 EAST BROWARD BLVD., STE 1900
FORT LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip 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, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME NEDIM, ZIV R
STREET ADDRESS 14000 N.W. 4TH STREET
CITY-ST-ZIP SUNRISE FL

TITLE VS ☐ DELETE

NAME MOTISI, ANTHONY
STREET ADDRESS 14000 N.W. 4TH STREET
CITY-ST-ZIP SUNRISE FL

TITLE TV ☐ DELETE

NAME GLEASON, JOHN
STREET ADDRESS 14000 N.W. 4TH STREET
CITY-ST-ZIP SUNRISE FL

TITLE V ☒ DELETE

NAME REYNOLDS, DONALD
STREET ADDRESS 14000 N.W. 4TH STREET
CITY-ST-ZIP SUNRISE FL

TITLE C ☐ DELETE

NAME STERN, YOAV
STREET ADDRESS 14000 N.W. 4TH STREET
CITY-ST-ZIP SUNRISE FL

TITLE D ☐ DELETE

NAME MITCHELL, DAVID J
STREET ADDRESS 14000 N.W. 4TH STREET
CITY-ST-ZIP SUNRISE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

T/V/D
V
FRED K. VON HUSEN
14000 N.W. 4TH ST.
SUNRISE, FL 33325

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0298986

CR2E034 (10/97)