

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000003159

1. Entity Name

AVIATION SALES LEASING COMPANY

FILED

May 09, 2000 8:00 am  
Secretary of State

05-09-2000 90064 032 \*\*\*150.00

Principal Place of Business

Mailing Address

6905 NW 25TH ST  
MIAMI FL 33122

6905 NW 25TH ST  
MIAMI FL 33122-1805

2. Principal Place of Business

3701 FLAMINGO ROAD

3. Mailing Address

3701 FLAMINGO ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIRAMAR, FL

City & State

MIRAMAR, FL

4. FEI Number

65-0665658

Applied For

Not Applicable

Zip

33027

Country

USA

Zip

33027

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent; or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE V  
NAME INNELLA, JAEMS  
STREET ADDRESS 6905 NW 25TH ST  
CITY-ST-ZIP MIAMI FL 33122 ☒ Delete

TITLE CFO  
NAME MICHAEL BRANT  
STREET ADDRESS 3701 FLAMINGO ROAD  
CITY-ST-ZIP Miramar, FL 33027. ☐ Change ☒ Addition

TITLE S  
NAME JACOBS, DENISE  
STREET ADDRESS 6905 NW 25TH ST  
CITY-ST-ZIP MIAMI FL 33122 ☒ Delete

TITLE S  
NAME PHILIP B. SCHWARTZ  
STREET ADDRESS ONE SE 3RD AVE 28TH FLOOR  
CITY-ST-ZIP MIAMI, FL 33131 ☐ Change ☒ Addition

TITLE P  
NAME WOODY, HAROLD M  
STREET ADDRESS 6905 NW 25TH ST  
CITY-ST-ZIP MIAMI FL 33122 ☐ Delete

TITLE  
NAME  
STREET ADDRESS 3701 FLAMINGO ROAD  
CITY-ST-ZIP MIRAMAR, FL 33027 ☒ Change ☐ Addition

TITLE DVST  
NAME CIVILETTO, JOSEPH E  
STREET ADDRESS 6905 NW 25TH ST  
CITY-ST-ZIP MIAMI FL ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE V  
NAME SASO, MICHAEL A  
STREET ADDRESS 6905 NW 25TH ST  
CITY-ST-ZIP MIAMI FL 33122 ☐ Delete

TITLE  
NAME  
STREET ADDRESS 3701 FLAMINGO ROAD  
CITY-ST-ZIP MIRAMAR, FL 33027. ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 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

4/26/00 954-532-8564

Date

Daytime Phone #