2001 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 30, 2001 8:00 am Secretary of State DOCUMENT # F9600003159 1. Entity Name , AVIATION SALES LEASING COMPANY 04-30-2001 90006 050 ***150.00 Principal Place of Business Mailing Address 3701 FLAMINGO RD 3701 FLAMINGO RD MIRAMAR FL 33027 MJRAMAR FL 33027 2. Principal Place of Business 3. Mailing Address 3601 FLAMINGO ROAD Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0665658 MIRAMAR, FL Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 33027 USA 33027 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. CFO ☐ Addition ☐ Delete TITLE Change BRANT, MICHAEL NAME 3601 FLAMINGO RD STREET ADDRESS STREET ADDRESS 3701 FLAMINGO RD CITY-ST-ZIP CITY-ST-ZIP MIRAMAR FL 33027 MIRAMAR, FL 33027 TITLE ☐ Delete TITLE Addition ☐ Chánge SCHWARTZ, PHILIP B NAME NAME STREET ADDRESS ONE SE 3RD AVE -28TH FLR STREET ADDRESS CITY-ST-ZIP CITY-ST-7(P **MIAMI FL 33131** TITLE Delete ☐ Change ☐ Addition WOODY, HAROLD M NAME NAME STREET ADDRESS 3701 FLAMINGO RD STREET ADDRESS CITY-ST-ZIP MIRAMAR FL 33027 CITY-ST-ZIP TITLE **Opelete** TITLE Change ☐ Addition SASO, MICHAEL A NAME NAME STREET ADDRESS 3701 FLAMINGO RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIRAMAR FL 33027 TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STREET ADDRESS

CITY-ST-ZIP

7/24/01 Date