2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000003491

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Entity Name

AAR AIRFRAME & ACCESSORIES GROUP, INC.

Principal Place of Business	Mailing Address
1100 N WOOD DALE ROAD WOOD DALE IL 60191 US	1100 N WOOD DALE ROAD ATTN: HOWARD PALSIFER WOOD DALE IL 60191-1060 US

DO NOT WRITE IN THIS SPACE 2/8/00 900041028 $150.00

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 11-2325519 ☐ Applied For ☐ Not

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
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525	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 _____ DATE
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 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 Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MACMANUS, TERRY 1100 N WOOD DALE ROAD WOOD DALE IL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V Martin D. Cooper 1100 N. WOOD DALE RD. WOOD DALE, IL 60191 ☐ Change
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VSD PULSIFER, HOWARD A 1100 N WOOD DALE ROAD WOOD DALE IL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V Edward Rytych 1100 N. WOOD DALE RD WOOD DALE, IL 60191 ☐ Change
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VTD ROMENESKO, TIMOTHY J 1100 N WOOD DALE ROAD WOOD DALE IL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STORCH, DAVID P 1100 N WOOD DALE ROAD WOOD DALE IL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DC ☒ Change
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V SLAPKE, PHILIP C 1100 N. WOOD DALE ROAD WOOD DALE IL 60191	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V HACKENDAHL, CRAIG 1100 N. WOOD DALE ROAD WOOD DALE IL 60191	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change

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: Howard A Pulsifer HOWARD A PULSIFER 2/3/00 KE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #