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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # F96000004655

1. Corporation Name
RALLYE AIRCRAFT CORPORATION



DO NOT WRITE IN THIS SPACE

Principal Place of Business: 7501 PEMBROKE ROAD, NORTH PERRY AIRPORT, PEMBROKE PINES FL 33023
Mailing Address: 7501 PEMBROKE ROAD, NORTH PERRY AIRPORT, PEMBROKE PINES FL 33023

3. Date Incorporated or Qualified: 09/10/1996
4. FEI Number: 13-2898620
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax: No

2. Principal Place of Business (21-24) and Mailing Address (25-28) details including Suite, Apt. #, etc., City & State, Zip, and Country.

9. Name and Address of Current Registered Agent: LAURAIN, THIERRY, NORTH PERRY AIRPORT, 7501 PEMBROKE ROAD, PEMBROKE PINES FL 33023

10. Name and Address of New Registered Agent (81-85) details including Name, Street Address, City, and 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.

SIGNATURE: _____ DATE: _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS (DELETE) table with columns for Title, Name, Street Address, City-ST-ZIP. Includes COB DEBRUN, PHILIPPE; PCEO BERNARD, STEPHANE; D DESCHAMPS, DOMINIQUE; S BRADFORD, GREGORY H; VCOB VAN DEN BROOK, CHRISTOPHE.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 table with columns for Title, Name, Street Address, City-ST-ZIP. Includes D BRADFORD, GREGORY H; S MATHISEN, RAYMOND H.

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...

SIGNATURE: _____ DATE: 3/3/99 (854) 833-1400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (1/1/98)