

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Feb 02, 2000 08:00 AM****Secretary of State****DOCUMENT # F99000001657**

1. Entity Name

AIRCRAFT 23772, INC.

Principal Place of Business

10800 BISCAYNE BLVD.
C/O UNICAPITAL CORP. LAW DEPT.
MIAMI FL
33161

Mailing Address

10800 BISCAYNE BLVD.
C/O UNICAPITAL CORP. LAW DEPT.
MIAMI FL
33161

2. Principal Place of Business

10800 BISCAYNE BLVD., #800

3. Mailing Address

10800 BISCAYNE BLVD., #800

Suite, Apt. #, etc.

C/O UNICAPITAL CORP. LAW DEPT.

Suite, Apt. #, etc.

C/O UNICAPITAL CORP. LAW DEPT.

City & State

MIAMI FL

City & State

MIAMI FL

Zip
33161Country
USZip
33161Country
US

4. FEI Number

65-0905639

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered AgentC T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROADPLANTATION
33324

FL

US

7. Name and Address of New Registered Agent

Name

SKYWATCH REGISTERED AGENTS, INC.

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

10800 BISCAYNE BLVD., LAW DEPT.

#800

City
MIAMI

FL

Zip Code
33161

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 **JANINE E. COX, ASST. SECRETARY****02/02/2000**

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 State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS**

| | | |
|----------------|----------------------|---------------------------------|
| TITLE | EVPS | <input type="checkbox"/> Delete |
| NAME | KALB MARTIN | |
| STREET ADDRESS | 10800 BISCAYNE BLVD. | |
| CITY-ST-ZIP | MIAMI FL 33161 | |

| | | |
|----------------|----------------------|---------------------------------|
| TITLE | VP | <input type="checkbox"/> Delete |
| NAME | VORRATH DAVID | |
| STREET ADDRESS | 10800 BISCAYNE BLVD. | |
| CITY-ST-ZIP | MIAMI FL 33161 | |

| | | |
|----------------|----------------------|---------------------------------|
| TITLE | VP | <input type="checkbox"/> Delete |
| NAME | CHAIT DANIEL | |
| STREET ADDRESS | 10800 BISCAYNE BLVD. | |
| CITY-ST-ZIP | MIAMI FL 33161 | |

| | | |
|----------------|----------------------|---------------------------------|
| TITLE | VP | <input type="checkbox"/> Delete |
| NAME | THORNTON SAM | |
| STREET ADDRESS | 10800 BISCAYNE BLVD. | |
| CITY-ST-ZIP | MIAMI FL 33161 | |

| | | |
|----------------|----------------------|---------------------------------|
| TITLE | VP | <input type="checkbox"/> Delete |
| NAME | THORNTON JEP | |
| STREET ADDRESS | 10800 BISCAYNE BLVD. | |
| CITY-ST-ZIP | MIAMI FL 33161 | |

| | | |
|----------------|----------------------|---------------------------------|
| TITLE | CDVT | <input type="checkbox"/> Delete |
| NAME | NEW ROBERT J | |
| STREET ADDRESS | 10800 BISCAYNE BLVD. | |
| CITY-ST-ZIP | MIAMI FL 33161 | |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------|----------------------------|--|
| TITLE | V | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | LIPPMAN WAYNE | |
| STREET ADDRESS | 10800 BISCAYNE BLVD., #800 | |
| CITY-ST-ZIP | MIAMI FL 33161 | |

| | | |
|----------------|----------------------------|--|
| TITLE | V | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | CAUFF STUART | |
| STREET ADDRESS | 10800 BISCAYNE BLVD., #800 | |
| CITY-ST-ZIP | MIAMI FL 33161 | |

| | | |
|----------------|-------------------------------|--|
| TITLE | V | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | THORNTON JEP | |
| STREET ADDRESS | 1900 SUMMIT TOWER BLVD., #860 | |
| CITY-ST-ZIP | ORLANDO FL 32810 | |

| | | |
|----------------|-------------------------------|--|
| TITLE | V | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | THORNTON SAM | |
| STREET ADDRESS | 1900 SUMMIT TOWER BLVD., #860 | |
| CITY-ST-ZIP | ORLANDO FL 32810 | |

| | | |
|----------------|----------------------------|--|
| TITLE | VT | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | NEW JONATHAN | |
| STREET ADDRESS | 10800 BISCAYNE BLVD., #800 | |
| CITY-ST-ZIP | MIAMI FL 33161 | |

| | | |
|----------------|----------------------------|--|
| TITLE | CPD | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | NEW ROBERT J | |
| STREET ADDRESS | 10800 BISCAYNE BLVD., #800 | |
| CITY-ST-ZIP | MIAMI FL 33161 | |

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: MARTIN KALB

VS 02/02/2000

RICHARD C. GILES, VICE PRESIDENT
33 BLEEKER STREET

MILLBURN, NJ 07041

TERI M. TRIMMER, ASST. SECRETARY
10800 BISCAYNE BLVD., #800

MIAMI, FL 33161

C. DERYL COUCH, ASST. SECRETARY
10800 BISCAYNE BLVD., #800

MIAMI, FL 33161

MARTIN KALB, EVP & SECRETARY
10800 BISCAYNE BLVD., #800

MIAMI, FL 33161

DAVID VORRATH, VICE PRESIDENT
10800 BISCAYNE BLVD., #800

MIAMI, FL 33161

DANIEL CHAIT, VICE PRESIDENT
10800 BISCAYNE BLVD., #800

MIAMI, FL 33161