FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

FILED
May 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G29543 (7)

1. Corporation Name
AEROSERVICE AVIATION CENTER, INC.

Principal Place of Business | Mailing Address

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/02/83

2. Principal Place of Business
21 5002 N.W. 36th Street
22 Suite, Apt. #, etc.
23 City & State: Miami, Florida
24 Zip: 33152 25 Country: USA

2a. Mailing Address
26 P.O. Box 520782
27 Suite, Apt. #, etc.
28 City & State: Miami, Florida
29 Zip: 33152-0782 30 Country: USA

4. FEI Number: 59-2280358 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

Saul J. Sack
5002 N.W. 36th Street
Miami, Florida 33152

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 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. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PC Vito La Forgia 14221 Leaning Pine Drive Miami Lakes, Florida 33014	☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	PC Vito La Forgia 150 Hunting Lodge Drive Miami Springs, Florida 33166	XX Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Saul J. Sack 5002 N.W. 36th Street Miami, Florida 33152	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS Lucrezia La Forgia 14221 Leaning Pine Drive Miami Lakes, Florida 33014	☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	AS Lucrezia La Forgia 150 Hunting Lodge Drive Miami Springs, Florida 33166	XX Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AST Anthony La Forgia 14221 Leaning Pine Drive Miami Lakes, Florida 33014	☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	AST Anthony La Forgia 5002 N.W. 36th Street Miami, Florida 33152	XX Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	100002538471 -05/28/98--01021--005 ***150.00	☐ Change ☐ Addition

CR2E034 (10/97)

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; 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Saul J. Sack Saul J. Sack, Secy 4/27/98 305-871-5557
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #