**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State , DIVISION OF CORPORATIONS

## DOCUMENT # G29543

1. Corporation Name

STREET ADDRESS

CITY-ST-ZIP

AEROSERVICE AVIATION CENTER, INC.

Principal Place	of Business	Mailing Address								
5002 N.W. 36 S	STREET	P.O. BOX 520782								
MIAMI FL 33152	2	MIAMI FL 33152-0782			DO NOT WRITE IN THIS SPACE					
US		US			3. Date Incorporated or Qualifed					
					03/02/1	•				
2. Principal Pl	ace of Business	2a. Mailing Address	,		4. FEI Numb			Арі	olied For	
3814	Curtiss Parkway	26			59-228	0358		No	t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate	of Status Desired		\$8.75 A		
22	27			- Continuation			Fee Re			
City & State	<u>.</u>	City & State	City & State		6. Election Campaign Financing				\$5.00 May Be Added to Fees	
	nia Gardens FL	28	Country			d Contribution	<del> </del>		o Fees	
Zip 33166	Country 25 US	Zip	Country			oration owes the cu Property Tax.	rrent year I		□No	
24 33166	9 Name and Address of Current	29 30	<u>'</u>		<del></del>	d Address of New	Registere			
	J. Name and Address of Current	registered rigorit	81 N	Name C						
SACK, SAUL J				82 Street Address (P.O. Box Number is Not Acceptable) 3014 Curtiss Parkway						
5002 N.W. 36 STREET				Street Addres	14 Cur	Eiss Park	way			
MIAMI FL 33152			83							
			84 0	nie.				. 85 Zip C	`ode	
				<sup>City</sup> Vi	rginia	Gardens	F	L   33	166	
11. Pursuant to the provisions of Sections 607,0502 and 607.1508, Florida Statutes, the above-named corporation submits office or registered agent, of both, in the state of Florida. Such change was authorized by the corporation's board of diagent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.							e purpose	of changing its	registered	
office or re agent. I ar	18 BOATO OF OTE	Citors. I fieledy ac	epi ilie app		Jistorou					
SIGNATURE	XIIII X XOUN	Lack	Jee	retury	· //7.	Vil.	Z? 19;	95		
	Signature, typed or printed name of registered agent		gistered Agent sig	hature required v		S/CHANGES TO O	DATE	AND DIRECTO	DC IN 12	
12.	PC OFFICERS AND	D DIRECTORS  DELETE	13.		ADDITION	S/CHANGES 10 0	rricers /	Change	Addition	
TITLE	LA FORGIA, VITO M	O beceive	1.2 NAME					74		
NAME	150 HUNTING LODGE DRIVE		1.3 STREET AD	ness 38	14 Curi	ciss Park	wav			
STREET ADDRESS	MIAMI SPRINGS FL 33166		1.4 CITY-ST-ZI	774		Gardens	$ ilde{ ext{FL}}$	33166		
CITY-\$T-ZIP	S	☐ DELETE	2.1 TITLE			<u></u>		Change	Addition	
NAME	SACK, SAUL J		2.2 NAME					,		
STREET ADDRESS			2.3 STREET AD			tiss Park	way			
CITY-ST-ZIP			2.4 CITY-ST-Z	<sub>up</sub>  Vi	rginia	Gardens	FL	33166		
TITLE	AS	☐ DELETE	3.1 TITLE					Change	☐ Addition	
NAME	LA FORGIA, LUCREZIA		3.2 NAME					•		
STREET ADDRESS	150 HUNTING LODGE DRIVE		3.3 STREET AD			ciss Park	_	22466		
CITY-ST-ZIP	MIAMI SPRINGS FL 33166		3.4. CITY-ST-Z	DP V1	rginia	GArdens	FL	33166		
TITLE	AST	☐ DELETE	4.1 TITLE					Change	Addition	
NAME	LA FORGIA, ANTHONY		4. 2 NAME	20	14 Cum	-iaa Dark				
STREET ADDRESS	5002 N.W. 36 STREET		4.3 STREET AD	DIVECOO		ciss Park	_	22166		
CITY-ST-ZIP	MIAMI FL 33152		4.4 CITY-ST-ZI	P V1	rginia	Gardens	FL	33166	□ Addition	
TITLE		☐ DELETE	5.1 TITLE					Change	Addition	
NAME			5.2 NAMÉ	NDOESE						
STREET ADDRESS			5.3 STREET AD							
CITY-ST-ZIP		☐ DELETE	5.4 CITY-ST-ZI	<del>                </del>				Change	☐ Addition	
TITLE		←] VELETE	6.2 NAME					[_] Gridinge		
NAME			U.Z HINNIE	ı						

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 suppliemental 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 postee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or on an attachment with an address, with all other like empowered. Secretar **SIGNATURE** 

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

CR2E034 (11/98)

May 08, 1999 8:00 am Secretary of State

05-08-1999 90051 043 \*\*\*150.00