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PROFIT CORPORATION ANNUAL REPORT

1997

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<u>561 546 3</u>318

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H14778

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S.N.S. AERO FLORIDA, INC.

Principal Place of Business Mailing Address % PHILIP S. SCHWARTZMAN % PHILIP S. SCHWARTZMAN 8553 S.E. BANYANTREE ST. 8553 S.E. BANYANTREE ST. HOBE SOUND FL 33455 HOBE SOUND FL 33455-2906 3. Date Incorporated or Qualified 3a. Date of Last Report 08/01/1984 02/06/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 73-6501210 26 Not Applicable Suito, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 П 28 Trust Fund Contribution Added to Fees Zip Country $Z_{(p)}$ Country This corporation has liability for intangible tax under s. 199.032, Yes X No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name SCHWARTZMAN, PHILIP S. 81 8553 S.E. BANYANTREE ST. Street Address (P.O. Box Number is Not Acceptable) **HOBE SOUND FL 33455** 83 RΔ 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 farmerar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 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 (96/6) DELETE Change TITLE 11 TITLE Addition SCHWARTZMAN, PHILIP S. NAME 1.2 NAME 8553 S. E. BANYANTREE ST STREET ADDRESS 1.3 STREET ADDRESS HOBE SOUND FL CITY-ST-20P 1.4 CITY-ST-ZIP DELETE Change ___ Addition TITLE 2.1 THLE SCHWARTZMAN, JOHN E. NAME 2.2 NAME 8553 S. E. BANYANTREE ST STREET ADDRESS 2.3 STREET ADDRESS HOBE SOUND FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Addition TITLE 3.1 THILE Change SCHWARTZMAN, ROBERT S. NAME 3.2 NAME 8553 S.E. BANYANTREE ST STREET ADDRESS 3.3 STREET ADDRESS HOBE SOUND FL CHTY - ST - ZIP 3 4. CITY - ST - ZIP DELETE TITLE Change Addition 41 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CHTY-ST-ZIP DELETE Change Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST- ZIP 5 4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY- \$1-2IP 64 CHTY-ST-ZIP

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), 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