

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # H21836

(2)

1. Corporation Name

QUIET NACELLE CORPORATION

Principal Place of Business

Mailing Address

8000 N.W. 56TH ST.
MIAMI FL 33166

8000 N.W. 56TH ST.
MIAMI FL 33166

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT 90

3. Date Incorporated or Qualified 09/14/1984	3a. Date of Last Report 05/01/1995
4. FEI Number 59-2484578	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BENDER, HARRY K. ESQ.
5915 PONCE DE LEON BLVD
SUITE 60
CORAL GABLES FL 33146

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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

Signature, typed or printed name of registered agent and use if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

11/6/96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BIRBRAGHER, FERNANDO	1.2 NAME	
STREET ADDRESS	8000 N.W. 56TH ST.	1.3 STREET ADDRESS	100002022311-0
CITY - ST - ZIP	MIAMI FL	1.4 CITY - ST - ZIP	-12/06/96--01063--019
TITLE	S	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BENDER, HARRY K	2.2 NAME	
STREET ADDRESS	5915 PONCE DE LEON BLVD SUITE 60	2.3 STREET ADDRESS	***375.00 ***375.00
CITY - ST - ZIP	CORAL GABLES FL	2.4 CITY - ST - ZIP	
TITLE	SD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ACOSTA, MIGUEL	3.2 NAME	
STREET ADDRESS	8000 N.W. 56TH ST.	3.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33166	3.4 CITY - ST - ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUSCH, JAMES C	4.2 NAME	
STREET ADDRESS	8000 N.W. 56TH ST.	4.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33166	4.4 CITY - ST - ZIP	
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GUTIERREZ, HERNANDO	5.2 NAME	
STREET ADDRESS	8000 N.W. 56TH ST.	5.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33166	5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(4), 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 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Fernando Birbragher

11/6/96 (305) 662-1131

CR2E034 (12/95)