2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

Apr 30, 2001 8:00 am Secretary of State **DOCUMENT # H23656** AIRCRAFT INTERIOR DESIGN, INC. 04-30-2001 90006 001 ***150.00 Principal Place of Business Mailing Address 13000 NW 38TH AVE POST OFFICE BOX 52 2752 P.O. BOX 52-2531 P.O. BOX 52-2531 OPA LOCKA FL 33054 MIAMI FL 33152-752 2. Principal Place of Business 3. Mailing Address 2659 NOVA DRIVE 3601 FLAMINGO 12D DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2449132 Dallas, I Milamar Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 3302 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name QUEVEDO, BENITO Street Address (P.O. Box Number is Not Acceptable) 301 COSTA BRAVA COURT MIAMI FL 33174 City Zip Code 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 **DCEO** Change TITLE Delete TITLE ☐ Addition NAME BAKER, DALE S NAME 3601 Flamingo Road MIRAMAN, FL 33027 STREET ADDRESS STREET ADDRESS 2200 NW 84TH AVE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33172 **CFOT** TITLE TITLE Change ☐ Addition ☐ Delete & Brant, Michael, C BRANT, MICHAEL C NAME NAME 3601 Flamingoroad STREET ADDRESS 2200 N.W. 84 AVENUE STREET ADDRESS CITY-ST-7IP CITY-ST-7IP **MIAMI FL 33122** Miramar IFL 33027 TITLE . ~ . -Change _ _ _ Addition. ☐ Delete JITLE Schwartzi, Philip one SE 3rd Ave - 28TH FL SCHWARTZ, PHILLIP NAME NAME STREET ADDRESS STREET ADDRESS 2200 N.W. 84 AVENUE MIAM 1, FL 33131 CITY-ST-ZIP CITY-ST-7IP MIAMI FL 33122 TITLE TITLE ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

4/24/8,