

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # H23656

1. Entity Name

Aircraft Interior Design, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2659 Nova Drive

Suite, Apt. #, etc.

City & State

Dallas, TX

Zip
75229

Country
USA

3. Mailing Address

623 Radar Road

Suite, Apt. #, etc.

City & State

Greensboro, NC

Zip
27410

Country
USA

4. FEI Number

592449132

Applied For

Not Applicable

5. Certificate of Status

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)

1200 South Pine Island Road

City

Plantation

FL

Zip Code
33324

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

Date

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Chairman/CEO
Roy T. Rimmer, Jr.
623 Radar Road
Greensboro, NC 27410

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President/COO
Gil West
623 Radar Road
Greensboro, NC 27410

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP/CFO
Robert Campbell
623 Radar Road
Greensboro, NC 27410

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Secretary
Philip Schwartz
1 S.E. 3rd Avenue, 28th Floor
Miami, FL 33131

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Philip Schwartz/Secretary

06/14/2002

305-374-5600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)



ACCOUNT NO. : 072100000032

REFERENCE : 625488 4311639

AUTHORIZATION :

Patricia Pappas

COST LIMIT : \$ 558.75

ORDER DATE : June 17, 2002

ORDER TIME : 12:27 PM

ORDER NO. : 625488-025

CUSTOMER NO: 4311639

CUSTOMER: Mr. Marco Cuono
Akerman Senterfitt & Eidson,
One Southeast Third Avenue
28th Floor
Miami, FL 33131-1714

ANNUAL REPORT FILING

NAME: AIRCRAFT INTERIOR DESIGN,
INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea-EXT#1114

EXAMINER'S INITIALS: _____

RECEIVED
02 JUN 17 PM 12:55
DIVISION OF CORPORATION