


FILED
May 03, 1999 8:00 am
Secretary of State

05-03-1999 90011 008 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # H44308

1. Corporation Name
AERO MARINE SYSTEMS CO., LTD.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 777S FLAGLER DR 500E WEST PALM BEACH FL 33401 US		Mailing Address 777S FLAGLER DR 500 E WEST PALM BEACH FL 33401 US		3. Date Incorporated or Qualified 02/25/1985	
2. Principal Place of Business 21 Chandelle Aviation Corp., Ltd. Suite, Apt. #, etc.		2a. Mailing Address 23 same Suite, Apt. #, etc.		4. FEI Number 59-2521521	
22 P. O. Box 17248 City & State		27 same City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 West Palm Beach, FL Zip		28 same Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 33406 Country 25 US		29 same Country 30 same		8. This corporation owes the current year intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent LICKLE, GARRISON 777 S FLAGLER DR, STE 500 E W PALM BCH FL 33401				10. Name and Address of New Registered Agent 81 Name Mr. Barry Shatunoff 82 Street Address (P.O. Box Number is Not Acceptable) Chandelle Aviation Corp, Ltd 83 3800 Southern Blvd 84 City West Palm Beach FL 85 Zip Code 33406	
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11. Pursuant to the provisions of Sections 607.0602 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 provisions of, Section 607.0505, Florida Statutes.
 SIGNATURE: *[Signature]* DATE: **5/14/99**

12. OFFICERS AND DIRECTORS <input type="checkbox"/> DELETE		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE DPTS NAME LICKLE, GARRISON D STREET ADDRESS 777 S FLAGLER DR, STE 500E CITY-ST-ZIP W PALM BCH FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3800 SOUTHERN BLVD WEST PALM BEACH, FL - 33406	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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 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 Block 13 if changed, or on an attachment thereto, with all other like empowered.

SIGNATURE: *[Signature]* **SIGNATURE REQUIRED** **4/26/99** **561 882 0870**

CR2E034 (11/88)