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CORP	ORATION		EPARTMENT OF STATE	Feb 04 1	1997 8:0)0am
1	al report 🛛 🕻 997		cretary of State OF CORPORATIONS	Secret	ary of S	tate
	IENT # H67					
AIRMARK	COMPONENTS, IN	IC.		A TRANSPILITATI OKAK TADAT BAHA DITAK BA	Anak anak anaka atam atam atam	
Principal Place o	of Business	Mailing Address				
2701 SOUTHWEST FORT LAUDERDA		2701 SOUTHWEST 21 FORT LAUDERDALE I				
				3. Date Incorporated or Qualified 07/18/1985	3a. Date of Last Re 03/06/1996	port
2. Principal Plac 21	ce of Business	28. Mailing Address 26		4. FEI Number 59-2557379	Арр	blied For Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc	,	5. Certificate of Status Desired	58.75 A	dditional
22 City & State		27 City & State		6. Election Campaign Financing	Fee Req	May Be
23 Žip	Country	28	Country	Trust Fund Contribution 8. This corporation has liability for	Added to intangible tax under s	
24	25 9. Name and Address	29 of Current Registered Agent	30	Florida Statutes	Yes No	
	irn, William R.		81 Name	•		
	Southwest Secone Lauderdale FL 333		82 Street Add	dress (P.O. Box Number is Not Acceptat	ole)	
			83			
•			64 City		FL 65 Zip Ci	ode
11. Pursuant to t	the provisions of Sections					1
	istered agent, or both, in familiar with, and accept	s 607 0502 and 607.1508, Florida S the State of Florida. Such change v the obligations of, Section 607.050	tatutes, the above-named col was authorized by the corpora 5, Florida Statutes,	poration submits this statement for the p ation's board of directors. I hereby accep		registered egistered
SIGNATURE	profuse, typed or profud name of n	gistened agent and tile it applicable.	(NOTE Registered Agent signature requ	uired when reinstating)	Durpose of changing its pot the appointment as re	
SIGNATURE 12. TILE	prature, typed or printed name of in OFF10 D		(NOTE Registered Agent signature requi		Durpose of changing its pt the appointment as re DATE ZERS AND DIRECTORS	
SIGNATURE 519 12. TILE NAME	profession of profession of some of a OFFIC D MORITZ, ERNEST	gistered agent and title if applicable.	(NOTE Registered Agent signature required agen	uired when reinstating)	Durpose of changing its pt the appointment as re DATE CERS AND DIRECTORS	IIN 12 (96)
SIGNATURE Sig 12. THE NAME STREET ADDRESS CITY-ST-ZIP	OFFIC OFFIC MORITZ, ERNEST 1424 NW 8TH ST DANIA FL	gestered agest and the rapp scable. CERS AND DIRECTORS	(NOTE Registered Agent signature required Agen	uired when reinstating)	Durpose of changing its pt the appointment as re DATE CERS AND DIRECTORS	IIN 12 (96)
SIGNATURE 12. TILE NAME STREET ADDRESS CITY-ST-7/P TILE	or along, topold or porticit rains of the OFFIC MORITZ, ERNEST 1424 NW 8TH ST DANIA FL SD	Opsternd agent and the mapp scable.	(NOTE Registered Agent signature registered Agen	uired when reinstating)	Durpose of changing its pt the appointment as re DATE CERS AND DIRECTORS	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-7/P TITLE NAME STREET ADDRESS	OFFIC OFFIC MORITZ, ERNEST 1424 NW 8TH ST DANIA FL SD MILBURN, WILLIAM R. 2301 SW 51ST CT	Opsternd agent and the mapp scable.	(NOTE Registered Agent signature registered Agen	uired when reinstating)	DURPOSE Of changing its pot the appointment as re DATE DATE DATE DATE DATE DATE DATE DATE	LIN 12 06.60 Addilion 66.60 SEC
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-7/P TITLE NAME STREET ADDRESS	or none, repeat or period name of n OFFIC MORITZ, ERNEST 1424 NW 8TH ST DANIA FL SD MILBURN, WILLIAM R.	Opsternd agent and the mapp scable.	(NOTE Registered Agent signature regi 13. 1.1 TIYLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TIFLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	uired when reinstating)	DATE DATE CRS AND DIRECTORS	Addition
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