## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT #** J41964 1. Corporation Name

SCHOMER AIRCRAFT CENTER CO.

	2000年1000年100日		•				ANT BUBAR BEBAR		
Principal Place of Business		Mailing Address							
120 PIPER BLVD.		120 PIPER 8	SLVD.				• '		
DAYTONA BEACH FL 32124 US	14-19-75 kg			DO NOT WRITE IN THIS SPACE					
••		•••				3. Date Incorporated or Qualifed			
						11/13/1986			
2. Principal Place of Busines	s H	2a. Mailing	Address			4. FEI Number		Applied For	
21		26				59-2771012		Not Applicable	
Suite, Apt. #, etc.		Suite, A	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 Additional Fee Required		
City & State			City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24 25	Country	Zip	30	intry		This corporation owes the current year     Personal Property Tax.	r Intangible		
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
SCHOMER, JOE,	ID TO			81	Name				
100 CESSNA BLVD				82	Street Addre	treet Address (P.O. Box Number is Not Acceptable)			
DAYTONA BEACH FL 32014(C				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		المعادية والمعادية والمرادية والمرادية	THE PARTY OF THE P
		gistered Agent signature i	e required when reinstating)
12.	OFFICERS AND DIRECTORS	13:65-45-46	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.
TITLE	PVS ⊡ DELETE	11 mle	☐ Change ☐ ☐ Addition
NAME	SCHOMER, JOE, JR	1.2 NAME	
STREET ADDRESS	1701 SKYHAWK CT 🔩	1.3 STREET ADDRESS	S
CITY-ST-ZIP	DAYTONA BCH FL 🐣	1.4 CITY-ST-ZIP	
TITLE	DELETE	2.1 TITLE	Change Addition
NAME	**************************************	2.2 NAME	
STREET ADDRESS	* S.	2.3 STREET ADDRESS	s )
CITY+ST-ZIP	5. ta	2. 4 CITY-ST-ZIP	
TITLE	□ DELETÉ	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	s
CITY-ST-ZIP		3.4. CITY-ST-ZIP	,
TITLE	DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4, 2 NAME	
STREET ADDRESS	1	4.3 STREET ADDRESS	s
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	→ A → A Control DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	A Company of the state of the s	5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	S
CITY-ST-ZIP	Fr.	5.4 CITY-ST-ZIP	
TITLE	DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	•	6.2 NAME	
STREET ADDRESS	V A	6.3 STREET ADDRESS	s
CITY OT 710		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 with an advices, with all other like empowered.

**SIGNATURE:** 

904-767-0400

**FILED** 

Jan 21, 1999 8:00am

**Secretary of State** 

01-21-1999 90008 021 \*\*\*150.00