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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1993



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

1. Name and Mailing Address of Corporation: **DOCUMENT # K50524 (3)**
AEROSERVICE AVIONICS, INC.
1600 NW 70TH AVE
MIAMI FL 33126-1312

If above mailing address is incorrect in any way, line through incorrect information and enter correction in block 2.

FILING FEE \$200.00
ANNUAL REPORT \$61.25 + \$138.75 CORPORATION SUPPLEMENTAL FEE
MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

3. Date Incorporated or Qualified 12/08/1988
3a. Date of Last Report 07/21/1992

4. FBI Number 650094229
Applied For Not Applicable

2. Mailing Address	2a. Principle Place of Business	5. Certificate of Status Desired	\$8.75 Additional Fee Required
21 P.O. Box 520782	25	☐	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
22	27	☐	
City & State	City & State	7. Nonprofit with IRS 501(c)(3) Tax Exempt Status	\$138.75 Supplemental Fee Not Required
23 Miami FL	28	☐	
Zip	Country	8. This corporation has liability for intangible tax under S. 193.032, Florida Statutes	☒ Yes ☐ No
24 33152	25 USA	29	30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SCOTT, STEVEN T.
1600 N.W. 70TH AVE.
MIAMI FL 33126

81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	85 Zip Code	86 Country
	3831 N.W. 60th Court		Virginia Gardens FL	33166	USA

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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

DATE

12. OFFICERS AND DIRECTORS				13. OFFICERS AND DIRECTORS CHANGED			
1.1 TITLE	P/C	1.1 TITLE		1.1 TITLE		1.1 TITLE	
1.2 NAME	LA FORGIA, VITO M	1.2 NAME		1.2 NAME		1.2 NAME	
1.3 ADDRESS	14221 LEANING PINE DR.	1.3 ADDRESS		1.3 ADDRESS		1.3 ADDRESS	
1.4 CITY-ST-ZIP	MIAMI LAKES FL	1.4 CITY-ST-ZIP		1.4 CITY-ST-ZIP		1.4 CITY-ST-ZIP	
2.1 TITLE	A/S	2.1 TITLE	S	2.1 TITLE		2.1 TITLE	
2.2 NAME	SCOTT, STEVEN T.	2.2 NAME	Scott, Steven T.	2.2 NAME		2.2 NAME	
2.3 ADDRESS	3831 NW 60 COURT	2.3 ADDRESS	3831 N.W. 60th Court	2.3 ADDRESS		2.3 ADDRESS	
2.4 CITY-ST-ZIP	VIRGINIA GARDENS FL	2.4 CITY-ST-ZIP	Virginia Gardens FL	2.4 CITY-ST-ZIP		2.4 CITY-ST-ZIP	
3.1 TITLE	A/S	3.1 TITLE	A/S	3.1 TITLE		3.1 TITLE	
3.2 NAME	LA FORGIA, LUCREZIA	3.2 NAME	La Forgia, Lucrezia	3.2 NAME		3.2 NAME	
3.3 ADDRESS	14221 LEANING PINE DRIVE	3.3 ADDRESS	14221 Leaning Pine Drive	3.3 ADDRESS		3.3 ADDRESS	
3.4 CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	Miami Lakes FL	3.4 CITY-ST-ZIP		3.4 CITY-ST-ZIP	
4.1 TITLE	A/S	4.1 TITLE	A/S/T	4.1 TITLE		4.1 TITLE	
4.2 NAME	LA FORGIA, ANTHONY	4.2 NAME	La Forgia, Anthony	4.2 NAME		4.2 NAME	
4.3 ADDRESS	14221 LEANING PINE DR	4.3 ADDRESS	14221 Leaning Pine Drive	4.3 ADDRESS		4.3 ADDRESS	
4.4 CITY-ST-ZIP	MIAMI LAKES FL	4.4 CITY-ST-ZIP	Miami Lakes FL	4.4 CITY-ST-ZIP		4.4 CITY-ST-ZIP	
5.1 TITLE		5.1 TITLE		5.1 TITLE		5.1 TITLE	
5.2 NAME		5.2 NAME		5.2 NAME		5.2 NAME	
5.3 ADDRESS		5.3 ADDRESS		5.3 ADDRESS		5.3 ADDRESS	
5.4 CITY-ST-ZIP		5.4 CITY-ST-ZIP		5.4 CITY-ST-ZIP		5.4 CITY-ST-ZIP	
6.1 TITLE		6.1 TITLE		6.1 TITLE		6.1 TITLE	
6.2 NAME		6.2 NAME		6.2 NAME		6.2 NAME	
6.3 ADDRESS		6.3 ADDRESS		6.3 ADDRESS		6.3 ADDRESS	
6.4 CITY-ST-ZIP		6.4 CITY-ST-ZIP		6.4 CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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. I further certify that I am an officer or director of the corporation, or the receiver or trustee empowered to execute this report as required by Chapter 637 or Chapter 517, Florida Statutes, and that my name appears in Block 12, Block 13, Block 14, or on an attachment with an address.

SIGNATURE

DATE April 29, 1993

Print Name of Signing Officer or Director
Anthony La Forgia

Title(s)
Assistant Secretary/Treasurer

Daytime Telephone Number
(305) 871-5557