

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP☐ WAIT☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300037613323

FILE NO. ANNUAL REPORT DELINQUENT AFTER JULY 1ST

CORPORATION

ANNUAL REPORT

1989



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

APPROVED

DO NOT WRITE IN THIS SPACE

FILED

FEB 21 1989

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$35 Required — Make Checks Payable To: Secretary of State

1 Name and Address of Corporation Principal Office

ZIP + 4

K50524 3
AEROSERVICE AVIONICS, INC.
1600 N.W. 70TH AVE.
MIAMI, FL 33126-1312

If above address is incorrect in any way enter the correct address
in item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3 Date Incorporated or Qualified To Do Business in Florida

12/08/1988

4 Federal Employer Identification Number (FEIN)

Applied For

5 Date of Last Report

6 Names and Street Addresses of Each Officer and Director, as of December 31, 1988

1 Title	2 Names of Officers and Directors	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State	5
1 D	FORGIA, VITO M. LA	14221 LEANING PINE DR.	MIAMI LK., FL	
1a P/C	La Forgia, Vito M.	14221 Leaning Pine Drive	Miami Lakes, FL 33014	
2 S/D	Smith, James Lawrence	6770 Indian Creek Drive	Miami Beach, FL 33141	
2a		Apt. 5-0		
3 D	Salazar, Juaguin	10020 N.W. 9 St. Circle	Miami, FL 33172	
3a		Apt. 201		
4				
4a				
5				
5a				
6				
6a				

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent

SMITH, JAMES Lawrence
1600 N.W. 70TH AVE.
MIAMI, FL 33126

8 Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84

FL

Zip Code 85

9 Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE

(Registered Agent Accepting Appointment)

DATE

10. If a foreign corporation, date first transacted business in Florida

11.

See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.

I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath.

(Officer or Director signing must be listed in Block 6.)

Signature

Date

February 14, 1989

Typed Name of Signing Officer or Director

Title

President

Telephone Number

(305) 591-1883

12. Should you desire a certificate of status check the box.

CERTIFICATE OF STATUS DESIRED



\$5 Additional Fee
required for a
Certificate of Status