FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 6:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K79865 (7)

1. Corporation Name

PEGASUS AIRCRAFT PARTS & SYSTEMS, INC

500001483155
-05/10/95--01094--019
****200.00 ****200.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
13034 S 133RD CT MIAMI FL 33186 US	13034 SW 133RD CT MIAMI FL 33186 US

3. Date Incorporated or Qualified: 04/13/1989
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business	2a. Mailing Address
21 13034 S.W. 133 Court	26 13034 S.W. 133 Court
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 MIAMI, FL 33186-5847	27 MIAMI, FL 33186-5847
City & State	City & State
23	28
Zip 24 33186-5847 Country 25 DADE	Zip 29 33186-5847 Country 30 DADE

4. FEI Number: 65-0115655 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CERIONI, FABIO
13831 SW 59 ST #105A
MIAMI FL 33183

10. Name and Address of New Registered Agent

81 Name: Cerioni Fabio
82 Street Address (P.O. Box Number is Not Acceptable): 13034 S.W. 133 Court
83
84 City: Miami, Florida FL 85 Zip Code: 33186

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: Fabio Cerioni (President) 04-18-95
Signature, typed or printed name of registered agent and title if applicable — Date — Registered Agent signature required when reinstating

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	☒ Change ☐ Addition PD
NAME	CERIONI, FABIO	12 NAME	Cerioni Fabio
STREET ADDRESS	13831 SW 59 ST #105A	13 STREET ADDRESS	13034 S.W. 133 Court
CITY-ST-ZIP	MIAMI FL	14 CITY-ST-ZIP	Miami, Fl 33186-5847
TITLE		21 TITLE	☐ Change ☐ Addition
NAME		22 NAME	500001483155 -05/10/95--01094--020
STREET ADDRESS		23 STREET ADDRESS	******8.75 ******8.75
CITY-ST-ZIP		24 CITY-ST-ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 address.

SIGNATURE: (Fabio Cerioni-President) 04-18-95 (305-232-9449)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

0203100 CP