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

STREET ADDRESS CITY-ST-ZIP

FILED Apr 16 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (6)K89582 SOUTHERN PRINCESS AEROSPACE, INC. Principal Place of Business Mailing Address 3611 NE 16TH TERR 3611 NE 16TH TERR BLDG A BLDG A DO NOT WRITE IN THIS SPACE POMPANO BCH FL 33064 POMPANO BCH FL 33064 3. Date Incorporated or Qualified 05/22/1989 2a. Mailing Address 4, FEI Number Applied For 2, Principal Place of Business Not Applicable 65-0180545 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country Country 8. This corporation owes or has paid the current year Intangible Zip Yes Personal Property Tax due June 30. 29 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ABUKHALAF, RONNIE 3611 N.E. 16TH TER. Street Address (P.O. Box Number is Not Acceptable) 82 POMPANO BEACH FL 33064 Zip Code City 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 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

SIGNATURE

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Y-Y-78 KONNIE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ■ DELETE Change ___ Addition 1.1 TITLE TITLE 1.2 NAME ABUKHALAF, RONNIE NAME 1741 SHORESIDE CIRCLE 1.3 STREET ADDRESS STREET ADDRESS W PALM BEACH FL 1.4 CITY-ST-ZIP CITY-ST-ZIP ■ DELETE Change Addition 2.1 TETLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3 4. CITY-ST-ZIP ☐ Addition Change DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Change ☐ Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME

6.3 STREET ADDRESS

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

PANNIE ARIKHM AT

with an address.

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