PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L08712

1. Corporation Name

AERO ENGINE MANAGEMENT CORP.

{									
Principal Place	e of Business	Mailing Address							
7690 S.W. 133 STREET 7690 S.W. 133 STREET									
MIAMI FL 33156 MIAMI FL 33156						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed 08/14/1989			
2. Principal Pl	ace of Business	2a. Mailing Address		_		4. FEI Number		A	Applied For
21		26				59-2667973		N	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certifcate of Status Desired			Additional
22 27						S. Sermodis of States Besides		Fee F	Required
City & State City & State						6. Election Campaign Financing		•	May Be
23		28				Trust Fund Contribution		Added	to Fees
Zip	Country	Zip _	_ Coນກ: −າ	iry		8. This corporation owes the curren	-	_=	
24	25		10			Personal Property Tax.		☐Yes	□No
	9. Name and Address of Current	Registered Agent	—— I.	1 N		10. Name and Address of New Re	gistered A	gent	
FMA	NUEL, JOSEPH			PI N	ame				{
13200 SW 128 ST STE F2				12 St	reet Addre	ss (P.O. Box Number is Not Acceptabl	e)		
MIAMI FL 33186				_					
""	MI 1 E 50 100			13					j
			8	4 Ci	ty		FL	85 Zip	Code
44 0	A. M	2 and CO7 1509 Florida Statuta	the abo		mod corno	sation submits this statement for the ni		hanging if	ts registered
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									
	Signature, typed or printed name of registered agent		<u> </u>	gent sign	ature required	when reinstating)	DATE	- DIDEOT	000 NI 40
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC	JERS ANL	Change	
TITLE	NADTEV II	☐ DELETE	1.1 TITU					Change	[Addigon
NAME	MARZLEY, H.		1.2 NAM						l
STREET ADDRESS	7690 SW 133 STREET		1.3 STREE		RESS				1
CITY-ST-ZIP	MIAMI FL			-ST-ZIP				Change	e Addition
TITLE	P COANCORD FOAMY	☐ DELETE	2.1 TITU					Change	Addition
NAME	CRAWFORD, FRANK J		2.2 NAM		1				ł
STREET ADDRESS	7690 SW 133 ST		2.3 STRI	EET ADD	RESS				Ì
CITY-ST-ZIP	MIAMI FL			-ST-ZIP	<u></u>	·		Change	- C Addition
TITLE		☐ DELETE	3.1 TITL					Change	Addition
NAME			3.2 NAM						
STREET ADDRESS			3.3 STRI	EET ADD	RESS				
CITY-ST-ZIP			_	-ST-ZIP	<u> </u>			FZCharri	- Addition
TITLE		☐ DELETE	4,1 THTL					☐ Change	Addition
NAME			4. 2 NA						
STREET ADDRESS			4.3 STR	EET ADO	RESS				1
CITY-ST-ZIP			4.4 CITY						
TITLE		☐ DELETÉ	5.1 TITU					Change	e 🔲 Addition
NAME			5.2 NAM						
STREET ADDRESS				EET ADD	RESS				1
CITY ST 7ID			54 CITY	-ST-ZIP	I				l

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling 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, of on an attachment with an address, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

H. Marzley, Treas.

☐ DELETE

☐ Change

Addition

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90042 020 ***150.00