

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED
AND
FILED

1995



DOCUMENT # L26201 (8)

AERO PRECISION REPAIR & OVERHAUL COMPANY, INC.

580 SOUTH MILITARY TRAIL
DEERFIELD BEACH FL 33442

580 SOUTH MILITARY TRAIL
DEERFIELD BEACH FL 33442

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2a
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9. Name and Address of Current Registered Agent

AMANTIA, WILLIAM P
APRO
580 S. MILITARY TRAIL
DEERFIELD BEACH FL 33442

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4
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6
7
8
10. Name and Address of New Registered Agent

10/30/1989
65-0160974
X
X
X

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04/04/1994
\$8.75 Additional Fee Required
\$5.00 May Be Added to Fees

81
82
83
84
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FL

12

D
YOUNG, J. MORGAN
~~X PETERBORO AIRPORT~~
~~X PETERBORO NJ~~

D
~~X MEVER, GERARD~~
~~X PETERBORO AIRPORT~~
~~X PETERBORO NJ~~

D
WISEKAL, FRANK W.
~~X PETERBORO AIRPORT~~
~~X PETERBORO NJ~~

D
NICOL, CHARLES
Z AERONAUTIQUE L BREGUET
VELIZY, FRANCE

D
GOSSET, BENOIT
Z AERONAUTIQUE L BREGUET
VELIZY FR

D
~~X BENOIT, BENOIT~~
Z AERONAUTIQUE L BREGUET
VELIZY, FRANCE (cont'd. on Attached Rider)

13

E. 15 Midland Avenue
Paramus, NJ 07652

X

Ginocchio, Peter L.
E. 15 Midland Avenue
Paramus, NJ 07652

X

E. 15 Midland Avenue
Paramus, NJ 07652

X

Leclere, Yves
BPTGW

SIGNATURE: *William P. Amantia* Vice President
SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER MUST BE ON THIS FORM
William P. Amantia

(305) 428-9500

Rider - Department of State, Division of Corporations

12. Officers and Directors (continued)

7.1	Title:	P
7.2	Name:	Tearle, Alex V.
7.3	Address:	c/o 580 South Military Trail
7.4	City, State, Zip:	Deerfield Beach, FL 33442
8.1	Title:	V
8.2	Name:	Amantia, William P.
8.3	Address:	c/o 580 South Military Trail
8.4	City, State, Zip:	Deerfield Beach, FL 33442
9.1	Title:	T
9.2	Name:	Vislocky, Joseph M.
9.3	Address:	c/o E. 15 Midland Avenue
9.4	City, State, Zip:	Paramus, NJ 07652
10.1	Title:	S
10.2	Name:	Boyle, Matthew A.
10.3	Address:	c/o E. 15 Midland Avenue
10.4	City, State, Zip:	Paramus, NJ 07652

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**CORPORATION
ANNUAL REPORT
1995**



STATE DEPARTMENT OF STATE
Sandra B. Norman
Secretary of State
DIVISION OF CORPORATIONS

5/1/96
CORPORATION

DOCUMENT # 1 26253

YONG LEE CORPORATION

Principal Place of Business Mailing Address
1036 S.W. FIRST ST.
MIAMI FLORIDA 33130

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1036 S.W. 1 ST.	2a. Mailing Address 26	4. FE Number 65-0152473	Agency For NET ANNUAL FEE
22	27	5. Certificate of Status Renewed <input type="checkbox"/>	\$8.75 Additional Fee Required
23 City & State MIAMI FLORIDA	27 City & State	6. Election of S-Corporation Status Trust FUTA Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24 Zip 33130	25 Country US	25 Zip	30 Country
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	

9. Name and Address of Current Registered Agent FLORIDA ANNUAL REPORT SERVICES INC. 1036 S.W. 1 ST. STREET MIAMI FLORIDA, 33130		81 Name	10. Name and Address of New Registered Agent
		82 Street Address (P.O. Box Number's Not Acceptable)	
		83	
		84 City	85 Zip Code FL

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 607.0503, Florida Statutes.

SIGNATURE: AMADA LOPEZ CANTERA, PRES
Signature of person or persons named registered agent and the incorporator (NOTE: Registered Agent signature required when reappointing) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (NOTE: Change <input type="checkbox"/> Add <input type="checkbox"/>	
1. TITLE D/P LEE, YONG	2. NAME 1922 S.W. 18th. Street MIAMI FLORIDA	1.1 TITLE D/P LEE YONG	2.1 NAME 2475 S.W. 25 TERRACE MIAMI FLORIDA.
3. TITLE D/S/T. LEE MARY	4. NAME 1922 S.W. 18th. Street MIAMI FLORIDA,	3.1 TITLE D/S. LEE KAREN	4.1 NAME 2475 S.W. 25 TERRACE MIAMI FLORIDA.
5. TITLE D/V . LEE KAREN	6. NAME 1922 S.W. 18th. Street MIAMI FLORIDA	5.1 TITLE D/T. LEE KAREN	6.1 NAME 2475 S.W. 25 TERRACE MIAMI FLORIDA.
7. TITLE	8. NAME	7.1 TITLE	8.1 NAME
9. TITLE	10. NAME	9.1 TITLE	10.1 NAME
11. TITLE	12. NAME	11.1 TITLE	12.1 NAME
13. TITLE	14. NAME	13.1 TITLE	14.1 NAME
15. TITLE	16. NAME	15.1 TITLE	16.1 NAME
17. TITLE	18. NAME	17.1 TITLE	18.1 NAME
19. TITLE	20. NAME	19.1 TITLE	20.1 NAME

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*****350000*****

8/16/12

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption provided in Section 607.0105, Florida Statutes, and that the information indicated on this annual report or supplemental annual report is true and accurate and that the incorporator has taken the appropriate steps to ensure that the information appears in Block 12 or Block 13 if provided or on an attachment with an address.

SIGNATURE: [Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR