

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

**CORPORATION  
ANNUAL REPORT  
1995**



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

**APPROVED  
AND  
FILED**

**95 APR 28 AM 10:06**

**DOCUMENT # L53234**

**(5)**

1. Corporation Name

**AEROSPACE COMPONENTS, INC.**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

Principal Place of Business

**ALAN J. KUSSY  
10681 75TH ST NORTH  
LARGO FL 34647**

Mailing Address

**ALAN J. KUSSY  
10681 75TH ST NORTH  
LARGO FL 34647**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

**02/23/1990**

3a. Date of Last Report

**04/20/1994**

4. FEI Number

**59-3004306**

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

2. Principal Place of Business

2a. Mailing Address

21

25

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**KUSSY, ALAN J.  
10681 75TH ST NORTH  
LARGO FL 34647**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85

Zip Code

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 and title if applicable

(NOTE: Registered Agent signature required when constituting)

DATE

12. OFFICERS AND DIRECTORS

| TITLE | NAME              | STREET ADDRESS  | CITY - ST - ZIP |
|-------|-------------------|-----------------|-----------------|
| P     | KUSSY, ALAN J     | 7566 N 124TH ST | SEMINOLE FL     |
| VP    | KUSSY, KIMBERLY A | 7566 N 124TH ST | SEMINOLE FL     |
|       |                   |                 |                 |
|       |                   |                 |                 |
|       |                   |                 |                 |
|       |                   |                 |                 |
|       |                   |                 |                 |
|       |                   |                 |                 |
|       |                   |                 |                 |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| 1.1 TITLE | 1.2 NAME | 1.3 STREET ADDRESS | 1.4 CITY - ST - ZIP |
|-----------|----------|--------------------|---------------------|
|           |          |                    |                     |
| 2.1 TITLE | 2.2 NAME | 2.3 STREET ADDRESS | 2.4 CITY - ST - ZIP |
|           |          |                    |                     |
| 3.1 TITLE | 3.2 NAME | 3.3 STREET ADDRESS | 3.4 CITY - ST - ZIP |
|           |          |                    |                     |
| 4.1 TITLE | 4.2 NAME | 4.3 STREET ADDRESS | 4.4 CITY - ST - ZIP |
|           |          |                    |                     |
| 5.1 TITLE | 5.2 NAME | 5.3 STREET ADDRESS | 5.4 CITY - ST - ZIP |
|           |          |                    |                     |
| 6.1 TITLE | 6.2 NAME | 6.3 STREET ADDRESS | 6.4 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 110.07(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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 in this filing, or on an attachment with an address.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Chapter 110.07