

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Kathleen Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 JUN -2 AM 10:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L57998

1. Corporation Name

UNITED AIRCRAFT SALES, CORP

Principal Place of Business

7014 NW 50th STREET
MIAMI FL 33166

Mailing Address

7014 NW 50th STREET
MIAMI FL 33166

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT

98-99@

4. Date Incorporated or Qualified
To Do Business in Florida

03/13/1990

5. FEI Number

65-0180036

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
Pres	JULIAN ORTEGA	6020 SW 93 rd COURT	MIAMI FL 33173

000002900940---4
-06/10/99--01077--004
***750.00 ***750.00

8. Name and Address of Current Registered Agent

JULIAN ORTEGA
6020 SW 93rd COURT
MIAMI FL 33173

9. Name and Address of New Registered Agent

Name

JULIAN ORTEGA

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

6020 SW 93rd COURT

Suite, Apt. #, Etc.

City

miami

State

FL

Zip Code

33173

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

Julian Ortega

REGISTERED AGENT MUST SIGN

Date

11. This corporation owes the current year
Intangible Personal Property Tax due June 30.

Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Julian Ortega

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JULIAN ORTEGA

5/22/99

Date

305 4719648

Daytime Phone #

CR2E061 (12/98)