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

**PROFIT CORPORATION** ANNUAL REPORT 1997

Principal Place of Business

3263 BEECHBERRY CIRCLE



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(5)

AIR CARRIER ENGINEERING, INC.

3263 BEECHBERRY CIRCLE

Mailing Address

FILED										
Jun	13	1997	8:00am							
Se	ecre	etary c	of State							



DAVIE FL 9332	26	DAVIE FL 33328-6720						
					3. Date Incorporated or Qualified 07/23/1990	3a. Date o		port
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		Ap	plied For
21		26			65-0207499		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		<b>8.75</b> A Fee Re	Additional quired	
City & State		City & State			8. Election Campaign Financing		\$5.00	May Be
23		28			Trust Fund Contribution		Added t	
Zip	Country	Zφ	Coun	try	8. This corporation has liability for it	ntangible tax	under s.	199.032,
24	25	29	30		Florida Statutes	Yes 🔲 N	40	
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Reg	pistered Age	nt	.,
CAF	RPENTER, RICHARD S.		8	Name				
	3 BEECHBERRY CIRCLE		82 Street Ad		dress (P.O. Box Number is Not Acceptab	le)		· · · · · · · · · · · · · · · · · · ·
	/IE FL 33328			- Caroorriac	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
5711			Ē	13				
			ā	14 City			5 Zip (	Code
			`	City		FL	" - " \	,,,,,,
11. Pursuant office or ragent. I a	egistered agent, or both, in the State in familiar with, and accept the oblig	e of Florida Such change was pations of, Section 607.0505, F	s authorized Florida Statu あんだいて	by the corpora tes.	poration submits this statement for the pation's board of directors. I hereby acceptions with the patient of the patients of t	of the appoint	imeni as	registered
12.		ID DIRECTORS	13.	egent signature requ	ADDITIONS/CHANGES TO OFFIC	ERS AND DI	RECTOR	S IN 12
TITLE	D	DELETE	1.1 THTL	f T			Change	Addition
NAME	CARPENTER, RICHARD S.		1.2 NAV	IE I				
STREET ADDRESS	3263 BEECHBERRY CIRCLE			EE1 ADDRESS				
CITY-ST-ZIP	DAVIE FL 33328			-ST-7IP				
TITLE	971110 T 2 00020	DELETE	2.1 TITL				Change	Addition
NAME			2.2 NAN	1E				
STREET ADDRESS			2 3 STR	EET ADDRESS				
CITY-ST-ZIP			2 4 CiT	Y-S1-ZIP				
TITLE		☐ DELETE	3 1 TITL	E			Change	Addition
NAME			3.2 NAN	1E				
STREET ADDRESS			3.3 STR	EET ADDRESS				
CITY-ST-ZIP			3.4. CIT	Y-ST-ZIP				
TITLE		DELETE	4.1 TITL	Ē			Change	Addition
NAME	,		4. 2 NAI	ME				
STREET ADDRESS			4.3 STR	EET ADDRESS				
CITY-ST-ZIP			4.4 CITY	'- ST-71P				
TITLE		☐ DELETE	5.1 TITL	E			Change	■ Addition
NAME			5.2 NAM	1E				
STREET ADDRESS			5.3 STR	EET ADDRESS				
CITY-ST-ZIP				/-ST-ZIP			Lac	
TITLE		☐ DELETE	6.1 111	E i		[	Change	Addition
NAME			6.2 NAN	1E				
STREET ADDRESS			6.3 STR	EE1 ADDRESS				
CITY-ST-7IP			64 CITY	(- \$1-7IP				

| 64.011-31-217 |
| I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. 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 eath; 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, or on an attachment with an address.

11/4/07

954-473-1491