	MITED LIABILITY COMPANY ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED CORPRION PHEIRI		
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE					COUNTY CONTRACTOR		
1. Name			Γ# _{L9800}		1		
SCOTTISH AVIATION GROUP, LLC 4051 N.W. 101ST DRIVE CORAL SPRINGS FL 33065					1a. Principal Place of Business Address 4051 N.W. 101ST DRIVE CORAL SPRINGS FL 33065		
Suite, Apt. #, etc Suite, A City & State City & S		pt. #, etc.		11/16/1998	FL		
				4. FEI Number	<u> </u> [Applied For	
		City & S	State		65-0892240 5. Date of Last Report	6.00000	Not Applicab
iþ	Country	Zip		Country	3. Date of Last Report	l	at Fee Required
	7. Name and Address of Curre	nt Registered	l Ageni	8.	Name and Address of New	Registered Agent/O	rffice
HUDSON, MATTHEW C 4051 N.W. 101ST DRIVE Street Address					P.O. Box Number is Not Ac	centable)	
	L SPRINGS FL 3306			Suite, Apt. #, etc.			
				Cone, Apr. 4, co	·.		
				City		Zip Code	
s register	ant to the provisions of Sections 608.41 red office or registered agent, or both, in red agent, and accept the obligations.				d liability company submits th	is statement for the pu	
GNATU	JRE	A Archiving of	E-176 Share formed Assessed	signature required when reastant	DATE _		
). Title	Managing Members/Manag			Business Street Address		City, State and Zip	Code
IGR	HUDSON, MATTHEW	С	4051 N.	W. 101ST D	RIVE COP	RAL SPRING	S FL
					sloor	002854	038 004901
					\ \frac{1}{2}	002854 -04/27/390 ****188.75	****188
						-04/27/990 ****188.75	****188

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