

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
 AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT 1996



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

FILED
 Jun 14, 1996 08:00 AM
 Secretary of State

DOCUMENT # M29631 (2)
 1. Corporation Name

EAGLE AIRCRAFT SERVICES, INC.



Principal Place of Business: 5500 NW 21 TERRACE HANGAR 14 FT. LAUDERDALE FL 33309
 Mailing Address: 5500 NW 21 TERRACE HANGAR 14 FT. LAUDERDALE FL 33309

3. Date incorporated or Qualified: 03/28/1986
 3a. Date of Last Report: 06/08/1995
 4. FEI Number: 59-2663671
 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: 21
 2a. Mailing Address: 26
 Suite, Apt #, etc.: 22
 City & State: 27
 Zip: 24 Country: 25
 Zip: 29 Country: 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

EATON, WILLIAM MICHAEL
 5500 NW 21 TERRACE HANGAR 14
 FT. LAUDERDALE EXEC. AIRPORT
 FT. LAUDERDALE FL 33309

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 the applicant to

(NOTE: Registered Agent signature required when not stated)

(DATE)

12. OFFICERS AND DIRECTORS

TITLE	DST	<input type="checkbox"/> DELETE
NAME	EATON, WANDA	
STREET ADDRESS	HANGER 14, FT. LAUDERDALE EXEC.	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	PCV	<input type="checkbox"/> DELETE
NAME	EATON, WILLIAM M	
STREET ADDRESS	HANGER 7 FT. LAUDER, EXEC.	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	PCV
23 STREET ADDRESS	EATON, WILLIAM M
24 CITY-ST-ZIP	HANGER 14 FT LAUDER, EXEC FT LAUDERDALE FL
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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 119.07(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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE:

William M Eaton

William M Eaton

6/10/96 954-772-4122

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)