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

29

9. Name and Address of Current Registered Agent

PROFIT CORPORATION ANNUAL REPORT

1997

24

SIGNATURE



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

M29929 DOCUMENT #

(0)

AVIONICS GROUP, INC. Principal Place of Business Mailing Address 13030 SOUTHWEST 133RD COURT 13030 SOUTHWEST 133RD COURT MIAM! FL 33186 MIAMI FL 33186-5855 3a. Date of Last Report 3. Date incorporated or Qualified 04/03/1986 01/24/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0163406 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 28 Country Zip Zip This corporation has liability for intangible tax under s. 199.032,

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R1 Name

82

6740 SW 87 TERRACE **MIAMI FL 33156**

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BREWER, W F

83 City 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.

10. Name and Address of New Registered Agent

Florida Statutes

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

FILED

Jan 14 1997 8:00am

Secretary of State

Stigration typed or protection e of registered agent and tale 1 applicable 12. OFFICERS AND DIFFECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PST Change DELETE 1.1 TITLE Addition TITLE BREWER, TOM 1.2 NAME NAME 7760 S.W. 143RD ST. 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY - ST - ZIP 1.4 CITY - ST - ZIP DELETE Change Addition 2.1 TITLE TITLE BREWER, TOM 2.2 NAME NAME 7760 S.W. 143RD ST. 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL CHY-SI-ZIP 2.4 City-St-ZiP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-SI-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 52 NAME

6.4 CITY - ST - ZIP CITY-ST-ZIP 14. 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 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 recoiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of the affect of the corporation or the recoiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 C(TY - ST - Z)P

61 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY ST ZII

TITLE

NAME

DELETE

Daytime Phone In

Change

Addition

(96/6)

Applied For

Fee Required

Added to Fees

Yes No

Not Applicable

CR2E034