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

FILED PROFIT Mar 20 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # M46686 (5)**POWER PROPELLER COMPANY** Principal Place of Business Mailing Address 2611 NW 21ST TERR. 2611 NW 21ST TERR. MIAMI FL 33142 MIAMI FL 33142 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/17/1987 2. Principal Place of Business 2a. Mailing Address 4. FFI Number Applied For 59-2771466 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered 81 Name PEREZ. JESUS E. 2601 N.W. 21ST TERR. Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33142** 83 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 rog stered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE Change Addition TITLE 1.1 TITLE PEREZ, JESUS E NAME 1.2 NAME 2601 N.W. 21ST TERR. 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ___ Addition ST 2.1 TITLE TITLE PEREZ, SUSANNA R NAME 2.2 NAME 2601 NW 21ST TERR 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition 3.1 TITLE Change TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST- ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETÉ Change ___ Addition 6.1 TITLE TITLE 6.2 NAME NAME

6.3 STREET ADDRESS

3-16-98 (305)622,5100

14. I 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

STREET ADDRESS CITY-ST-ZIP

Block 12 or Block 13 if changed, of or