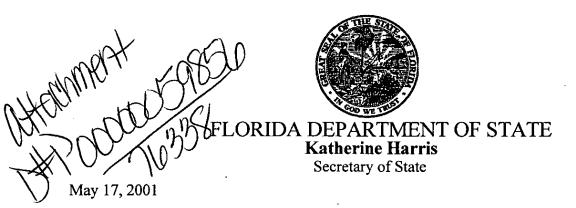
2001 UNIFORM BUSINESS REPORT (UBR) Jul 13, 2001 8:00 am **Secretary of State DOCUMENT #P00000059856** 1. Entity Name 05-11-2001 90118 013 \*\*\*150.00 AERONAUTIX USA CORPORATION Principal Place of Business Mailing Address 3. Mailing Address 2. Principal Place of Business 11610 Aviation Blvd. 11610 Aviation Blvd. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE A-3A-34. FEI Number Applied For City & State City & State Not Applicable 59-3652192 West Palm Beach, West Palm Beach, FL \$8.75 Additional Country Country 5. Certificate of Status Desired 33412 33412 Fee Required 7. Name and Address of New Registered Agent . .\_. 6. Name and Address of Current Registered Agent Thomas-Baur Street Address (P.O. Box Number is Not Acceptable) 100 N. Biscayne Blvd., 21st Floor 33132 Miami, FL Zip Code City FI 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE DATE (NOTE: Registered Agent signature required when rainsulting) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 -Tax filing requirement and elects to do so. Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. ☐ Change 【 Addition TITLE D/P ☐ Deleta TITLE ח Wolfgang Lachinger NAME NAME STREET ADDRESS Stotten 8 STREET ADDRESS CITY-ST-ZIP A-4663 Laakirchen, Austria CITY-ST-7IP ☐ Change Addition TITLE Delete TITLE NAME NAME Joerg L. Oberhofer STREET ADDRESS STREET ADORESS Luftfahrtschule GmbH CITY-ST-ZIP Ferdinand Graf von Zeppelin-Strasse 1 \_ Addition Oelete TITLE TITLE A-2700 Wiener Neustadt NAME NAME Austria/Europe STREET ADDRESS STREET ADDRESS C/TY-ST-7/2 CITY-ST-ZIP ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under path; that I am an officer or director of the corporation or the receiver or trustee of powered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 11 or Block 12 if changed, or on an attachment with ap a with all other like empowered. SIGNATURE: PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED



AERONAUTX USA CORPORATION 11610 AVIATION BLVD A-3 WEST PALM BEACH, FL 33412

Subject: AERONAUTX USA CORPORATION

Reference

P00000059856

Number:

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

List the street address of each officer/director listed on the report or on an attachment.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/kg ANNUAL REPORTS SECTION