## FILED 2002 UNIFORM BUSINESS REPORT (UBR) Mar 24, 2002 8:00 am § P01000009812 DOCUMENT # Secretary of State 1. Entity Name AURORA AVIATION, INC. 03-24-2002 90029 025 \*\*\*150.00 Principal Place of Business Mailing Address **7240 SW 127TH STREET** 7240 SW 127TH STREET MIAMI FL 33156 **MIAMI FL 33156** 2. Principal Place of Business Mailing Address .w. 158th.st Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agen 7. Name and Address of New Registered Agent ÉLOUCHA, LM ESO Street Address (P.O. Box Number is Not Acceptable) ATKINSON DINER STONE MANKUTA & PLOUCHA P 1946 TYLER STREET HOLLYWOOD FL 33020-4517 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. -After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. ☐ Addition TITLE ☐ Delete TITLE Change POTTER, JAMES D NAME NAME **7240 SW 127TH STREET** STREET ADDRESS STREET ADDRESS MIAMI FL 33156 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET: ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP mile & at 538 ☐ Delete TITLE ☐ Change Addition

ng does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if I hereby certify that the information supplied with this fill indicated on this report or supplemental report is true an of the corporation or the receiver or trustee empower changed, or on an attachment with an address

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME OF TAX TOP THE

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PHINTED