

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000004408

1. Entity Name

Yamaguchi & Smith Aero Technologies LLC

Principal Place of Business

2837 SW 3rd Ave.
MIAMI, Florida 33129

Mailing Address

2837 SW 3rd Ave.
MIAMI, Fla. 33129

2. Principal Place of Business

2837 SW 3rd Ave.
Suite, Apt. #, etc.

3. Mailing Address

2837 SW 3rd Ave.
Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

Zip

33129

Country

USA

Zip

33129

Country

USA

4. FEI Number

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

Atrium Reg. Agents Inc.
9500 San Remo #125
Coral Gables, Fla. 33146

7. Name and Address of New Registered Agent

Name Michael J. Liberatore ESQ.
Street Address (P.O. Box Number is Not Acceptable)
1401 Brickell Ave. #300
City MIAMI FL Zip Code 33131

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Michael J. Liberatore

MICHAEL J. LIBERATORE

09-12-02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE MANAGING DIRECTOR ☐ Delete
NAME DAVID S. WILLIG
STREET ADDRESS 2837 SW 3rd Avenue
CITY-ST-ZIP MIAMI, FLORIDA 33129

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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13. 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 report or supplemental 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 Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

DAVID S. WILLIG

09-12-02 305-860-1881

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

09/12/02 AV

CR2E034 (4/02)



DO NOT WRITE IN THIS SPACE