

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 04, 2002 8:00 am
Secretary of State

09-04-2002 90088 008 ***158.75

DOCUMENT # **PO1000104131**

1. Entity Name

Trinity Aerospace Inc.

DO NOT WRITE IN THIS SPACE

978143

2. Principal Place of Business

6601 LYONS ROAD

Suite, Apt. #, etc.

Suite H-1

City & State

Coconut Creek, FL

Zip

33073

Country

BROWARD

3. Mailing Address

6601 LYONS ROAD

Suite, Apt. #, etc.

Suite H-1

City & State

Coconut Creek, FL

Zip

33073

Country

BROWARD

DO NOT WRITE IN THIS SPACE

4. FEI Number

03-0380167

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Michael Thompson

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

6601 LYONS ROAD- Suite H-1

City

Coconut Creek

FL

Zip Code

33073

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

Michael Thompson, Michael Thompson, Secretary

DATE

8/26/02

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



January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 **P**
NAME **PRESIDENT**
STREET ADDRESS **EDWARD THOMPSON**
CITY-ST-ZIP **5752 NW 56th MANOR**
Coral Springs, FL 33067

TITLE **V**
NAME **VICE PRESIDENT**
STREET ADDRESS **DAVID THOMPSON**
CITY-ST-ZIP **11600 NW 48th Street**
Coral Springs, FL 33076

TITLE **T/S**
NAME **SECRETARY/TREASURER**
STREET ADDRESS **MICHAEL THOMPSON**
CITY-ST-ZIP **4934 NW 52nd Avenue**
Coconut Creek, FL 33073

TITLE
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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Michael Thompson, Michael Thompson, Secretary

Date

8/26/02

Daytime Phone #

CR2E034B (12/01)



Attachment

www.triaero.net

978143

PO1000104131

August 27, 2002

Uniform Business Report
Division of Corporations
P.O.Box 1500
Tallahassee, FL 32302-1500

Dear Sir or Madam:

Attached is our completed Uniform Business Report (UBR). We do apologize about the lateness of this report, but we never received this report in the mail and only recently were advised by our accountant that it should have been completed. We feel that this was not received because of an incorrect zip code that is on file in your office. In lieu of this, we request that the \$400.00 late fee be waived and you accept our completed form with the original fee.

If there are any questions, please feel free to contact me at (954)725-5530. Thanking you in advance for your understanding, I am

Sincerely,

A handwritten signature in cursive script that reads 'Michael Thompson'.

Michael Thompson
Secretary/Treasurer

A large, stylized handwritten signature or set of initials, possibly 'GT', written in a cursive style.