

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P14599 (5)

1. Corporation Name

AVIATION SYSTEMS INTERNATIONAL, INC.

Principal Place of Business

1377 CLINT MOORE ROAD
1377 CLINT MOORE RD
BOCA RATON FL 33487
US

Mailing Address

PO BOX 3020
BOCA RATON FL 33431-0920
US



3. Date Incorporated or Qualified

05/27/1987

3a. Date of Last Report

07/10/1995

2. Principal Place of Business

2a. Mailing Address

21 1377 CLINT MOORE ROAD

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

27

City & State

23 BOCA RATON, FL

28

Zip

Country

Zip

Country

24 33487

25 US

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

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

83

84 City

FL

85 Zip Code

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 type for principal officer, registered agent or officer/director

NOTE: Registered Agent's Signature required when not filing.

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME RAYMAN, LAWRENCE
STREET ADDRESS 1377 CLINT MOORE ROAD
CITY-STATE-ZIP BOCA RATON FL

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP

PD
RAYMAN, LAWRENCE
1377 CLINT MOORE ROAD
BOCA RATON FL 33487

☒ Change ☐ Addition

TITLE SD
NAME RAYMAN, BIRGITTA
STREET ADDRESS 1377 CLINT MOORE RD
CITY-STATE-ZIP BOCA RATON FL

☐ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP

SD
RAYMAN, BIRGITTA
1377 CLINT MOORE ROAD
BOCA RATON FL 33487

☒ Change ☐ Addition

TITLE CD
NAME BECK, LOUIS S
STREET ADDRESS 2300 CORPORATE BLVD NW
CITY-STATE-ZIP BOCA RATON FL

☐ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

CD
BECK, LOUIS S
2300 CORPORATE BLVD NW
BOCA RATON FL

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 Block 12 or Block 13 if changed, on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LAWRENCE RAYMAN

4/24/96

(407) 241-9599

CR2E034 (12/95)