SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P16878

(1)

AVIATION CONSTRUCTORS, INC.

FILED
Jul 16 1998 8:00am
Secretary of State



Principal Place of Business Mailing Address							
1 '		Mailing Address					
2690 CUMBERL atlanta ga 3	AND PKWY SUITE 200	2690 CUMBERLAND PKWY., SUITE 200 ATLANTA GA 30339					
HILANIA GA 3	0000	ATLANTA GA 30339				DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified 11/19/1987	
2. Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For	
21		26	- 1			58-1742184 Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.						60.75	
22	•	27	27			5. Certificate of Status Desired XX Fee Required	
City & Stat	le	City & State				B. Election Campaign Financing \$5.00 May Be	
		28			Trust Fund Contribution Added to Fees		
Zip			Cou	intry		8. This corporation owes or has paid the current year Intangible	
24	25	29	30			Personal Property Tax due June 30. X Yes No	
	9. Name and Address of Curren	Registered Agent				10. Name and Address of New Registered Agent	
	PRENTICE-HALL CORPORATION	SYSTEM INC.		81	1 Name		
1201 HAYS STREET				82 Street Address (P.O. Box Number is Not Acceptable)			
SUITE 10\$				02 Guest Address (F.O. DOX (Address to 140) Acceptable)			
TALL		83					
	<u> </u>				- A-1	And 7% On to	
				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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) DATE							
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	1	DELETE	1.1 Ti	TLE		Change Addition	
NAME			1.2 N	1.2 NAME			
STREET ADDRESS			1.3 STREET ADDRESS		ADDRESS		
CITY-ST-ZIP	ATLANTA GA		1.4 CI	1.4 CITY-ST-ZIP			
TITLE			2.1 11	2.1 TITLE		Change Addition	
NAME	STRATTON, TERRY A		2.2 N	2.2 NAME			
STREET ADDRESS			2.3 \$1	2.3 STREET ADDRESS			
CITY-ST-ZIP	ATLANTA GA 2.4		2.4 CI	2.4 CITY-ST-ZIP			
TITLE			3.1 Ti	ITLE		Change Addition	
NAME			3.2 N	3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS		ADDRESS		
CITY-ST-ZIP			3.4 C	3.4 CITY-ST-ZIP			
TITLE	DP					Change Addition	
NAME	STRATTON, TERRY		4.2 N/	AME			
STREET ADDRESS	2921 LENOX ROAD		4.3 ST	IREET.	ADDRESS		
CITY-ST-ZIP	ATLANTA GA			ITY-ST-			
TITLE	D :	DELETE	5.1 TI			Change Addition	
NAME	STRATTON, TODD A	الماديد الماديد	5.2 N			5.2.95	
STREET ADDRESS	1401 W PACES FERRY RD. #13	315			ADDRESS		
CITY-ST-ZIP	ATLANTA GA						
TITLE			4 CITY-ST-ZIP		Secretary Change XX Addition		
NAME	CRAKER, CONAN	fr) here te	6.2 N/			James P. Beers	
STREET ADDRESS	AAAA AHIDOTICI DI MAY						
1	Distance OA					2815 Kinnett Drive	
CITY-ST-ZIP	טייייייייייייייייייייייייייייייייייייי		6.4 CI	ITY-ST-	ZIP	Lilburn, Ga. 30047	

14. 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 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, or on an attachment with an address.

7/, /90

770-431-0800