Jun 03, 1999 8:00 am Secretary of State

06-03-1999 90002 001 *3,000.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300006566

1. Corporation Name

HEICO CORPORATION

Principal Place	e of Business	Mailing Address							41116 4111 1551
3000 TAFT ST						DO NOT WRITE	IN THIS S	PACE	
						3. Date Incorporated or Qualifed 01/27/1993			
2. Principal P	lace of Business	2a. Mailing Address	_			4. FEI Number			plied For
21		26				65-0341002			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	\neg	\$8.75 A	
22		27				5. Certificate of Status Desired		Fee Re	quired
City & Stat	e	City & State				6. Election Campaign Financing	7	\$5.00	May Be
23		28				Trust Fund Contribution		Added t	o Fees
Zip	Country	Zip	Count	try		8. This corporation owes the current	year Intan	ıgible	
24	25	29 3	0			Personal Property Tax.	[Yes	□No
	9. Name and Address of Current	t Registered Agent				10. Name and Address of New Reg	jistered Aç	gent	
		<u> </u>	8	31	Name				
MEN	idelson, victor h			32	Stroot Add	Iress (P.O. Box Number is Not Acceptable	e)		
3000) TAFT ST		"	2	Sileet Aud	iless (r C. Dox Hamber is Het Acceptation	′/		
HOL	LYWOOD FL 33021		8	33					
1			<u> </u>					T T	
			8	84	City		FL	85 Zip (Code
44 D	to the provisions of Sections 607.0503	2 and 607 1508 Florida Statutes	the abo)V#-	named corr	poration submits this statement for the pu	rpose of ch	nanging its	registered
office or r	edistered agent, or both, in the State (ot Florida. Such change was auti	norizea t	DV U	he corporat	ion's board of directors. I hereby accept t	he appointr	ment as re-	gistered
agent. I a	m familiar with, and accept the obligat	tions of, Section 607.0505, Florid	la Statute	es.					
SIGNATURE						- d. Lag spiritohagy	DATE		i
	Signature, typed or printed name of registered agen	D DIRECTORS	13.	geni	signature requir	ADDITIONS/CHANGES TO OFFICE		DIRECTO	RS IN 12
12.	D OFFICERS AN	□ DELETE	1.1 TITLI			n ·		Change	Addition
TITLE	CARWILE, JACOB T	E betere	1.2 NAM		50	chriesheim, Man,		_	
NAME						ma TAFT STRET			
STREET ADDRESS	3000 TAFT ST		1		ADDRESS 3	Liliano Fl 33021			ļ
CITY-ST-ZIP	HOLLYWOOD FL 33021		14 CITY	_	-ZIP /1	Holly 2000, Pl 33021		Change	Addition
TITLE	D	☐ DELETE	2.1 TITLI			hater, Guy C		change	LIP/Idamon
NAME	HIGGINBOTTOM, SAMUEL L		22 NAM		51	ood TAPT Street			
STREET ADDRESS	3000 TAFT ST		2.3 STR	EET/	ADDRESS 3	ood THE			
CITY-ST-ZIP	HOLLYWOOD FL 33021		2.4 CIT	Y-ST	r-zip /	hllywood, Pl 33021	<u>_</u>		- Control of the control
TITLE	D	☑ DELETE	3.1 TITL	E		D' Wast To		Change	Addition
NAME	MANIERI, PAUL F		3.2 NAM	Œ	M	orrison, Albert Ir.			
STREET ADDRESS	3000 TAFT ST		3.3 STR	EET.	ADDRESS 3	roo TATET Street			
CITY-ST-ZIP	HOLLYWOOD FL 33021		3.4. CIT	Y-ST	-ZIP /1	tollywood, Fl 33021 Controller			
TITLE	DV	☐ DELETE	4.1 TITL	E		Controller		Change	Addition
NAME	MENDELSON, ERIC A		4 2 NAM	ME	h	terman, ADAMS			,
STREET ADDRESS	3000 TAFT ST		4.3 STR	EET.		DED TAFT Street			
CITY-ST-ZIP	HOLLYWOOD FL		4.4 CITY	/-ST	-ZIP IH	6/140000, FI 33021			
TITLE	DCP	☐ DELETE	5.1 TITL			5. 6.		Change	☑ Addition
NAME	MENDELSON, LAURANS A		5.2 NAM		10	etendre, ElizABETH K			
	3000 TAFT ST		1		ADDRESS 3,	000, THET Street			
STREET ADDRESS			5.4 CITY		.7IP	401/4 MOD 5/ 33021			
CITY-ST-ZIP	HOLLYWOOD FL	□ DELETE	6.1 TITL		/	Holly WOOD, 51 33021		Change	Addition
τπιε	VT THOMAS IRWIN S	□ DELETE	6 2 NAM			FTTER, Judith W			
MAME	I DELINION INVININ		~ 2 m/dv		102				

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 suppliemental 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 appear of the corporation of the corporati

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS 3000 TAFFT

SIGNATURE:

STREET ADDRESS

3000 TAFT STREET

HOLLYWOOD FL 33021

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

F1 33021

≡ ;.

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Secretary of State DIVISION OF CORPORATIONS

OCUMENT # P9300006566

Country

9. Name and Address of Current Registered Agent

29

HEICO CORPORATION

Place of Business	Mailing Address	DO NOT WRITE IN THIS SPACE				
TAFT ST TWOOD FL 33021	3000 TAFT ST HOLLYWOOD FL 33021					
		Date Incorporated or Qualifed 01/27/1993				
Principal Place of Business	2a. Mailing Address	4. FE! Number	Applied For			
	26	65-0341002	Not Applicable			
Suite, Apt. #, etc.	Suite, Apt #, etc	5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			

MENDELSON, VICTOR H 3000 TAFT ST HOLLYWOOD FL 33021

25

	Personal Property Tax. Li Yes Li No	<u>ე</u>
	10. Name and Address of New Registered Agent	
81	Name	
82	Street Address (P.O. Box Number is Not Acceptable)	
83		
84	City FL 85 Zip Code	

8. This corporation owes the current year intangible

MOCHINERY .

568946-90002-5 P93000006566

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.

Country

30

:-	Signature, typed or printed name of registered agent and title if applicable	. (NOTE: Re	gistered Agent signature r			DATE	
	OFFICERS AND DIRECTORS		13.	ADDITION	S/CHANGES TO OFFIC		
	D	☐ DELETE	1.1 TITLE	, DIV	· for 11	☐ Change	Addition
	CARWILE, JACOB T	-	1.2 NAME	Mendelson, 3000 THE Hollywood,	Vicion H		
i Alamani, iyo	3000 TAFT ST		1.3 STREET ADDRESS	3000 THE	T STILE!		
ST. ZIP	HOLLYWOOD FL 33021		1.4 CITY-ST-ZIP	Hollywood,	P1 33021		
	D	DELETE	2.1 TITLE				
	HIGGINBOTTOM, SAMUEL L		22 NAME	-			
: AFREC : 2:	3000 TAFT ST		2 3 STREET ADDRESS				
ST ZIP	HOLLYWOOD FL 33021	,	2 4 CITY-ST-ZIP				
	0	☑ D€LETE	3 1 TITLE	,			
	MANIERI, PAUL F		32 NAME	,			
_1 ADDRESS	3000 TAFT ST		33 STREET ADDRESS				
ST-ZIP	HOLLYWOOD FL 33021		34 CITY-ST-ZIP				
	DV	☐ DELETE	41 TITLE	}			
_	MENDELSON, ERIC A		4 2 NAME		•		
_ r aqaar_gg	3000 TAFT ST		4.3 STREET ADDRESS	:			
ST ZIP	HOLLYWOOD FL		4.4 CITY-ST-ZIP				
	DCP	□ DELETE	5 1 TITLE				
_	MENDELSON, LAURANS A		52 NAME				
i addinaetro	3000 TAFT ST		5 3 STREET ADDRESS				
ST-ZIP	HOLLYWOOD FL		5 4 CITY-ST-ZIP	 		-,	
=	VT	☐ DELETE	61 TITLE			ı	n
-	THOMAS, IRWIN S		62 NAME				
_: ADDNESS			6.3 STREET ADDRESS				
ET 710	HOLLYWOOD FL 33021		64 CITY-ST-ZIP	1			

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, with all other like empowered.

FONATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daylime Phone #