

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000007731

1. Entity Name

E. D. & G. EXECUTIVE AIRCRAFT, INC.

FILED

Apr 14, 2000 8:00 am
Secretary of State

04-14-2000 90003 033 ***150.00

Principal Place of Business

5247 N DIXIE HWY
A-2
OAKLAND PARK FL 33334
US

Mailing Address

5247 N DIXIE HWY
A-2
OAKLAND PARK FL 33071-6782
US

2. Principal Place of Business

8466 N.W. 14th ST
Suite, Apt. #, etc.

3. Mailing Address

8466 NW 14th ST
Suite, Apt. #, etc.

City & State

Coral Springs FL

City & State

Coral Springs FL

4. FEI Number

65-0388584

Applied For

Not Applicable

Zip

33071

Country

US

Zip

33071

Country

US

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GRUMMET, KURT
5247 N DIXIE HWY A-2
#D-1
OAKLAND PARK FL 33334

7. Name and Address of New Registered Agent

Name Gerda GRUMMET

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

8466 NW 14th ST

City Coral Springs

FL

Zip Code 33071

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

Gerda Grummet
(NOTE: Registered Agent signature required when reinstating)

4/9/00
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 \$150.00
After MAY 1, 2000 Fee will be \$550.00
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 D ☒ Delete
NAME GRUMMET, KURT
STREET ADDRESS 5237 N DIXIE HWY #D-1
CITY-ST-ZIP OAKLAND PARK FL 33334

TITLE V ☐ Delete
NAME HANSEN, PAUL
STREET ADDRESS 15442 SOMORA DRIVE
CITY-ST-ZIP SPRING HILL FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Change ☐ Addition
NAME Gerda GRUMMET
STREET ADDRESS 8466 NW 14th ST
CITY-ST-ZIP Coral Springs FL 33071

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

TITLE D ☐ Change ☒ Addition
NAME Angelika M. Wallace
STREET ADDRESS 8466 NW 14th ST
CITY-ST-ZIP Coral Springs FL 33071

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

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

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

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: *Gerda Grummet*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/00 954-7967226
Date Daytime Phone #