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

PROFIT CORPORATION ANNUAL REPORT

CITY - ST - ZP

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1	996	DIVISION O	F CORPORATIONS		
DOCUM 1. Corporation (Name	00020043 (4)		
BRITT	AERO CLUB INC.			A DECIMAL AND AND POINT OF A DECIMAL PROPERTY OF A DECIMAL PROPERT	II BULLA HAIN AAIN BANK BLADA JAN ABA
Principal Place of Business		Mailing Address		1 188118 B1 110 1818 8 1111 8 4 111 0 8 3 14 0 B1	I ODII KILI BODIH III IOO III OO IKAK BIILO II
15800 N.W. 49TH AVENUE Miami Fl 33014		15800 N.W. 49TH AVENUE		1	
MIAMI FL 33	W14	MIAMI FL 33014			1-1-1-1
				3. Date Incorporated or Qualified 3a 03/12/1993	. Date of Last Report 04/24/1995
2. Principal Place of Business		2a, Mailing Address		4. FEI Number	Applied For
[21]		26		NOT APPLICABLE	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	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Ζηρ 24	Country 25	Zip 29	Country 30	8. This corporation has liability for intang Florida Statutes Yes	,
12.71	g. Name and Address of Curre			10. Name and Address of New Regist	
			81 Name		
	R, RICHARD M AY AVENUE		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
	FL 33133		83		, ,
	2 40.00		B4 City		ar I 7io Codo
					FL 85 Zip Code
or registere	d agent, or both, in the State of Flo	rida. Such change was author	ized by the corporation's boar	ation submits this statement for the purpose of of directors. I hereby accept the appointment	of changing its registered office ent as registered agent. I am
famil ar with	i, and accept the obligations of, Sec	ction 607.0505, Florida Statute	es.	, ,	
SIGNATURE	ignature, typeo or printed name of registered age	ort and tille if applicable (N	IOTE: Registered Agent signature required	1 when reinstaling)	DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TOLE NAME	PD BRITT, RICHARD T SR	☐ DELETE	1. 1 TITLE 1.2 NAME	•	☐ Change ☐ Addition
STREET ADDRESS	15800 N.W. 49TH AVE.		1.3 STREET ADDRESS		
CITY-S1-ZIP	MIAMI FL 33014		1.4 CITY-ST-ZIP		
1011	STD	DELETE	2 1 TITLE		Change Addition
NAME	Britt, Richard T Jr 15800 N.W. 49TH AVE.		2 2 NAME		
STREET ADDRESS	MIAMI FL 33014		2.3 STREET ADDRESS		
THE		DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
C-TY-ST-Z-P		FT1 per ere	3.4 CITY-ST-ZIP		
THEE NAME		DELETE	4. 1 TITLE 4.2 NAME		Change Addition
STHEFT ADDRESS			4.3 STREET ADDRESS		
007-S1-ZP			4.4 CITY - ST - ZIP		
THELE		☐ DELETE	5 1 TITLE		Change Addition
NAME			5.2 NAME		
STHEET ADDRESS			5 3 STREET ADDRESS		
CITY - ST ZIT		☐ DELETE	5.4 Crty - St - ZIP 6 1 Title		Change Addition
NAME		- -	6 2 NAME		_ · _
STHEET ADDRESS			6.3 STREET ADDRESS		

6.4 CITY - ST - ZIP

Daytime Phone #

14. Ido 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; or to an attachment with an address.

SIGNATURE AND TYPEO OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR