

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

FILED  
May 13 1998 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1998</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT #** P93000027846 (31)  
 1. Corporation Name  
**BJT AVIATION INC**


Principal Place of Business Mailing Address

DO NOT WRITE IN THIS SPACE

<b>2. Principal Place of Business</b> 21 <b>T HANGER #1</b> Suite, Apt. #, etc. 22 <b>MELBOURNE AIRPORT</b> City & State 23 <b>MELBOURNE FL</b> Zip 24 <b>32901</b> Country		<b>2a. Mailing Address</b> 26 <b>PO Box 372233</b> Suite, Apt. #, etc. 27 City & State 28 <b>Satellite Beach</b> Zip 29 <b>32937</b> Country 30		<b>3. Date Incorporated or Qualified</b> <b>4-14-93</b>		<b>4. FEI Number</b> <b>59-3226024</b>		Applied For Not Applicable	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		<b>6. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					


<b>9. Name and Address of Current Registered Agent</b> <b>DON HANERHAN</b> <b>113 CAT LAY LANE</b> <b>INDIAN HARBOUR BCH FL 32937</b>				<b>10. Name and Address of New Registered Agent</b> 81 Name <b>Albert M Thomas</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>3219 S. ATLANTIC AVE #401</b> 83 84 City <b>COCOA BEACH FL</b> 85 Zip Code <b>32931</b>			
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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  **Albert M Thomas** DATE **4-26-98**  
 (NOTE: Registered Agent signature required when reinstalling)

<b>12. OFFICERS AND DIRECTORS</b>				<b>13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</b>			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	11 TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	<b>DON HANERHAN</b> <input checked="" type="checkbox"/> DELETE	<b>113 CAT LAY LANE</b>	<b>INDIAN HARBOUR BEACH 32937</b>		<b>PRESIDENT</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
	<b>PRESIDENT</b> <input checked="" type="checkbox"/> DELETE	<b>DON HANERHAN</b>	<b>113 CAT LAY LANE</b>		<b>JOHN KROBOTH</b>	<b>225 RIGGS AVE</b>	<b>MELBOURNE BEACH 32951</b>
	<input type="checkbox"/> DELETE	<b>INDIAN HARBOUR BCH FL 32937</b>			<b>VICE PRESIDENT</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
	<input type="checkbox"/> DELETE				<b>FRANK BLOUNT</b>	<b>104 E BLUFF TERRACE</b>	<b>MELBOURNE FL 32901</b>
	<input type="checkbox"/> DELETE				<b>SEC/TREASURER</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
	<input type="checkbox"/> DELETE				<b>ALBERT M THOMAS</b>	<b>3219 S. ATLANTIC #401</b>	<b>COCOA BEACH, FL 32931</b>
	<input type="checkbox"/> DELETE				<b>DIRECTOR</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
	<input type="checkbox"/> DELETE				<b>JOHN KROBOTH</b>	<b>225 RIGGS AVE</b>	<b>MELBOURNE BEACH 32951</b>
	<input type="checkbox"/> DELETE						
	<input type="checkbox"/> DELETE						
	<input type="checkbox"/> DELETE						
	<input type="checkbox"/> DELETE						

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 190.01(3)(b), Florida Statutes, and that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same 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 387, Florida Statutes, and that the same appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  **ALBERT M THOMAS** SECRETARY DATE **4-26-98** **4078986983**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/97)