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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Jan 22 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000087241 (4)

J & T AIRCRAFT, INC.

• • • • • • • • • • • • • • • • • • • •	,								
Principal Place	e of Busines		Mailing	Address				T I DOLIDGE THE COIDS THAN COINT BOME OUTE OUTER HOLD HOLD HOLD HOLD OLS FIRM THAN	
332 VILLAGE DRIVE				332 VILLAGE DRIVE					
ST. AUGUSTIA	NE FL 32095	ST. AL	ST. AUGUSTINE FL 32095				DO NOT WRITE IN THIS SPACE		
US		US					3. Date Incorporated or Qualified 12/17/1993		
2. Principal Pi	ace of Busin	ness	2a, Mai	2a. Mailing Address				4. FEI Number Applied For	
21			26	26				59-3214497 Not Applicable	
Sulte, Apt.	#, etc.		Suit	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional	
22			27	······································				Fee Required	
City & State	₽		— <u> </u>	City & State				6, Election Campaign Financing \$5.00 May Be	
Zip Country				Zip Country				Trust Fund Contribution Added to Fees	
Zip		····	29		├ ──	лшу		8, This corporation owes or has paid the current year lotangible Personal Property Tax due June 30. Yes XNo	
24	9. Name and Address of Current			[30]				10. Name and Address of New Registered Agent	
ARI	NOLD, THO					81	Name		
		DRIVE SUITE F							
		NE FL 32095					82 Street Address (P.O. Box Number is Not Acceptable)		
0 1.				1					
						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 tamiliar with, and accept the obligations of, Section 607,0505, Florida Statutes.									
SIGNATURE Signature, typod or printed name of registeres agent and title if applicative. (NOTE Registered Agent signature required when reinstating) DATE									
12.			AND DIRECTOR		13.		- it big/ista-b	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSTD			DELETE	1.1 T	TLE		Change Addition	
NAME ARNOLD, THOMAS S				1.2 NAME			[
STREET ADDRESS		e number 3	MBER 307 13 STREET ADD			ADDRESS	332 F VILLAGE DRIVE ST. AUGUSTINE FL 32095		
ST. AUGUSTINE FL 32095				1.4 City - S			T-ZIP	ST. AUGUSTINE FL 32095	
TITLE	ITLE			DELETE	DELETE 2.1 TITLE			Change Addition	
NAME	NAME			2.2 NAME					
STREET ADDRESS	TREET ADDRESS			2.3 STREET ADD			ADDRESS		
CITY-ST-ZIP					2.4 C		ił-ZIP		
TITLE	'LE			DELETE 31 TII				Change Addition	
NAME					3.2 NA				
STREET ADDRESS					1		address		
CITY-ST-ZIP TITLE				DELETE	3.4. C		T-ZIP	Change Addition	
NAME				PT OFFEIE	4.1 TI 4. 2 N		-	Last change Last Adolpton	
STREET ADDRESS							ADDRESS .		
CITY-ST-ZIP					4.3 S1		- 1		
TITLE				DELETE	5.1 10		1 · £1r	Change Addition	
NAME					5.2 NA		\	0- Insel 1901(17-1	
STREET ADDRESS							ADDRESS		
CITY-ST-ZIP					5.4 CI		- 1		
TITLE				DELETE				Change Addition	
NAME					62 NA	ME	,		
STREET ADDRESS					6.3 STREET ADDR				
CITY-ST-ZIP					6.4 CF	TY-S1	r-ZIP		
14. I hereby c	ertify that the	information supplied	with this filing	does not qualify f	or the exe	mpt	ion state	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information	
officer or o Block 12 o	director of the or Block 13 if	arreport or supplicate a corporation of the changed, or on an a	praraminual repo sociver or truste tachment with a	e empowerd to an address.	execute t	ม เกล his r	eport as	od in Section 119.07(3)(i), Florida Statutes. I further certify that the information in the same legal effect as if made under oath; that I am an integrated by Chapter 607, Florida Statutes; and that my name appears in	