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

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Apr 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000022346 (8)

1. Corporation Name
AEROMODEL INTL' TECH. SERVICE, INC.

Principal Place of Business	Mailing Address
1454 N.W. 21st Street Miami, FL 33142	1454 N.W. 21st Street Miami, FL 33142

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 3/22/94

4. FEI Number: 65-0476368 — ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30: ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 2699 Collins Ave.	26 2699 Collins Ave.
22 Suite, Apt. #, etc: Ste. # 114	27 Suite, Apt. #, etc: Ste. # 114
23 City & State: Miami Beach, FL	28 City & State: Miami Beach, FL
24 Zip: 33140 — 25 Country: N/A	29 Zip: 33140 — 30 Country: N/A

9. Name and Address of Current Registered Agent
DA Rocha J. Franca
1454 N.W. 21st Street
Miami, FL 33142

10. Name and Address of New Registered Agent
81 Name: DA Rocha J. Franca
82 Street Address (P.O. Box Number is Not Acceptable): 2699 Collins Avenue
83: Ste. # 114
84 City: Miami Beach — FL — 85 Zip Code: 33140

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: X — Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) — DATE: 4/9/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DA Rocha, Jose Franca 4290 N.W. 37th Court Miami, FL ☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	DP DA Rocha J. FRANCA 2699 Collins Avenue ~~Ste. #114~~ Miami Beach, FL 33140 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

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***150.00

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 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.

SIGNATURE: X — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date: 4/9/98 — Daytime Phone #: (305)547-1111

CR2E034 (10/97)