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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400038627 (3)

R.N.E. AIRCRAFT, INC.

Principal Place of Business Mailing Address				T 1801/2014 WE INTIL SIDE BOND BOID BOID BOID BOID BISIEF INDIA DISTE FINDS 1801 1801 1801		
6201 TAMIAMI MIAMI FL 3312		6201 TAMIAMI CANAL RD MIAMI FL 33126-4563				
				3. Date Incorporated or Qualified 05/19/1994	3a. Date of Last Report 03/01/1996	
	lace of Business	2a. Mailing Address		4. FEI Number 65-0493788	Applied For	
21 Suite And Histor			26		Not Applicable	
Suite, Apt. #, etc. 22			Suite, Apt. #, etc.		\$8.75 Additional Fee Required	
City & State			City & State			
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Ζφ	Country	Zip	Country	8. This corporation has liability for i		
24	25	29	30	Florida Statutes	Yes No	
	9. Name and Address of Cur	rent Registered Agent	641 51	10. Name and Address of New Re	gistered Agent	
	RIGUEZ, ROBERTO		81 Name	EMILCE R. 16d	ri (vez	
6201 TAMIAMI CANAL RD				82 Street Address (P.O. Box Number is Not Acceptable)		
MIAI	VII FL 33126		83		11711	
				5033 NW 757	AT 6 11	
			84 City	NINHI	FI 85 Zip Code	
11. Pursuant	to the provisions of Sections 607 (0502 and 607, 1508. Florida Statute	es the above-name	corporation submits this statement for the p		
office or r	egisteredragent, or both, in the St	arts of Florida Such change was a	uthorized by the co	rporation's board of directors. I hereby accep	of the appointment as registered	
	L level at the	ingalions of, addition buy toods, Fig.	ilida Sialules.			
SIGNATURE	Signature, typed or protein name of phystereo	agent angil in 1 approprie (NOTE	Registered Agent signatu	re required when reinstating)	DATE	
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12	
TOLE	DP	V] DELETE	1.1 TOTLE	P LICE D PORM	Change Addition	
NAME	RODRIGUEZ, ROBERTO		1.2 NAME	EMILCE R ROLK	Mell	
STREET ADDRESS	6201 TAMIAMI CANAL RD		1 3 STREET ADDRESS		79/6/1	
CITY-S1-ZIP	MIAMI FL 33126	T Drifts	1.4 City+St-ZiP	MIAMI PIS	2126	
THILE		L_] DELETE	21 TITLE		Change L Addition	
NAME DIMET ADDRESS			2.2 NAME			
STREET ADDRESS CITY-S1-7IP			23 STREET ADDRESS			
JULE JULE		DELETE	2 4 CHY-ST-ZIP 31 TITLE		Change Addition	
NAME			32 NAME		Orange riscinosi	
STREET ADDRESS			3 3 STREET ADDRESS			
CITY-ST-7/P			3.4. City-St-ZiP			
1/ILE		☐ DELETE	4 1 TITLE	***************************************	☐ Change ☐ Addition	
NAME			4 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-7/P		·-·	4.4 CITY - ST - ZIP			
TITLE		DELETE	51 TITLE		☐ Change ☐ Addition	
Hame			5.2 NAME			
STREET ADDRESS			5 3 STREET ADDRESS			
CITY-ST-7.P		DELETE	5.4 CITY+ST-ZIP		Charter Clades	
TITLE		fill nerrig	6.1 TITLE	·	Change Addition	
NAME CIPCEL ADODE CO			6.2 NAME			
STREET ADORESS			6.3 STREET ADDRESS		,	
CITY-ST-ZiP 14. I do heret	by certify that the information suns	olied with this filing does not qualif	6.4 CITY+ST-ZIP v for the exemption	stated in Section 119.07(3)(i), Florida Statute:	s. I further certify that the	
informatio	o indicated on this annual report i	or supplemental annual report is tr	ue and accurate an	d that my signature shall have the same lega report as required by Chapter 607, Florida S	I offect as if made under noth: that	
appears i	n Block 12 or Block 13 il changed	For the receiver of trustee empow For on an attachment with an add	ress.	report as required by Chapter 607. Florida S	ialutes; and that my name	

SIGNATURE

HAME OF SIGNING OF FICER ON PRECTOR

7/9 /

FILED

Feb 12 1997 8:00am

Secretary of State

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