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

PROFIT CORPORATION ANNUAL REPORT

1998

City-ST-ZIP

Block 12 or Block 13 if changed, on



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000046522 (6) **DOCUMENT #**

ENSIGN AIRCRAFT HOLDINGS, INC.

Principal Place of Business Mailing Address 1101 N.E. 10TH ST 1101 N.E. 10TH ST DO NOT WRITE IN THIS SPACE POMPANO BEACH FL 33060 POMPANO BEACH FL 33060 3. Date Incorporated or Qualified 06/22/1994 Mailing Address 4, FEI Number 2. Principal Place of Business Applied For 65-0704780 Not Applicable 21 Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country 8. This corporation owes or has paid the current year Mangible Country Z_{Ψ} Personal Property Tax due June 30. Yes 25 30 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent HOWARD, JR. JIM 1101 N.E. 10TH ST 82 83 POMPANO BEACH FL 33060 84 08, Flivida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 11. Pursuant to the provision Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered cup 1607,0505, Florida Statutes. office or registered age agent. I am familiar SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition 1.1 TITLE TITLE HOWARD, JAMÉS J NAME 1.2 NAM! 1101 N.E. 10TH ST #26 1.3 STREET ADDRESS STREET ADDRESS POPANO BEACH FL 33060 1.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE TITLE 21 THE 22 NAME NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2 4 CITY - S1 - ZIP Change Addition DELETE 31 DHE TIFLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST - ZIP Addition TITLE DELFTE 4.1 TITLE Change 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE 5.1 TITLE TIFLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 City - \$1 - ZiP CITY-ST-ZIP SIDDD 24834 Ethange DELETE Addition TITLE 6.1 TITLE -04/09/98--01003--006 6.2 NAME NAME ***450.00 STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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

an address

an attachment witi

FILED Apr 08 1998 8:00am Secretary of State

