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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

## P94000084817 (3) DOCUMENT #

INTERNATIONAL AERONAUTICAL CONSULTANTS, INC.

Principal Place of Business

Mailing Address

**FILED** May 19 1998 8:00am Secretary of State



HANGER 603 DAYTONA BEACH FL 32114		HANGER 603	1385 AVIATION CENTER PKWY HANGER 603 DAYTONA BEACH FL 32114			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	
					11/21/1994		
2. Principal Pl	ace of Business	2a. Mailing Addi	ess		4. FEI Number	Applied For	
21		26	26		59-3203326	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #	Suite, Apt. #, etc.			\$8.75 Additional	
22		27			5. Certificate of Status Desired	Fee Required	
City & State		City & State			6, Election Campaign Financing	\$5.00 May Be	
23		28	· · · · · · · · · · · · · · · · · · ·		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	<del>-</del>	untry	<ol><li>This corporation owes or has paid the of</li></ol>		
24	25 Name and Address of Curre	[29]	30		Personal Property Tax due June 30.	Yes No	
f A1	<del></del>	aur negisteren wildir		81 Name	10. Name and Address of New Registere	d Agent	
LAVIGNA, MICHELE				b) Name			
1585 AVIATION CENTER PKWY HANGER 603				<b>62</b> Street	Address (P.O. Box Number is Not Acceptable)		
	YT <b>O</b> NA BEACH FL 32114			83			
DA	TIONA DEACH FL 32114						
				84 City	F	85 Zip Code	
11 Pursuant t	o the provisions of Sections 607.05	502 and 607 1508. Florid	ta Statutes, the a	hove-namer			
office or re	gistered agent, or both, in the Sta-	te of Florida, Such chan	ge was authorize	d by the cor	d corporation submits this statement for the purpose poration's board of directors. I hereby accept the a	ppointment as registered	
	п <b>тат</b> ннаг wiin, алсі ассері те өсіг	galions of, Section 607.	ubub, Fiorida Sta	tutes.			
SIGNATURE	Stgnature, typied or printed name of registered a	gent actitite if applicable.	(NOTE: Registere	d Agent signatur	o required when reinstating) DATE	<del></del>	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12	
TITLE	P	DE	LETE 1.1 TI	TLE		☐ Change ☐ Addition	
NAME	LAVIGNA, MICHELE S		1.2 N	AME		3	
STREET ADDRESS	1585 AVIATION CENTER PK		1.3 ST	TREET ADDRESS		}	
CITY-ST-ZIP	DAYTONA BEACH FL 32114	}	140	ITY - ST - ZIP		ر آغ	
TITLE		☐ DE	LETE 2111	TLE		Change Addition	
NAME			2.2 N	AME			
STREET ADDRESS			2.3 \$1	TREET ADDRESS			
CITY-ST-ZIP				ITY - ST - ZIP			
TITLE		☐ DE	LETE 3.1 TI	TLE		Change Addition	
NAME			3.2 N/	AME			
STREET ADDRESS			<b>3.</b> 3 S1	Tree1 address			
CITY-ST-ZIP				ITY-ST-ZIP			
TITLE		DE	LETE 4.1 TI	TLE	-	Change Addition	
NAME			4. 2 N	AME			
STREET ADDRESS			4.3 ST	REET ADDRESS			
CITY-ST-ZiP				TY-ST-ZIP			
TITLE		☐ DE	LETE 5.1 TF	TLE		☐ Change ☐ Addition	
NAME			5.2 NA	AME			
STREET ADDRESS			5.3 ST	REFT ADDRESS			
CITY-ST-ZIP				TY-ST-ZIP			
TITLE		□ DE	LETE 6.1 TIT	TLE		Change Addition	
NAME			6.2 NA	AME			
STREET ADDRESS			6.3 ST	REET ADDRESS			
CITY-ST-ZIP			6.4 CI	TY-ST-ZIP			

14. Thereby 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 supplience 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.