FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT . Secretary of State 1996 DIVISION OF CORPORATIONS P95000013101 (7) **DOCUMENT #** ALEMANIA AIRCRAFT, INC. Principal Place of Business Mailing Address 4729 DEL PRADO BLVD. 4729 DEL PRADO BLVD. CAPE CORAL FL 33904 CAPE CORAL FL 33904 Date Incorporated or Qualified 02/14/1995 3a. Date of Last Report 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 Na XI Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zφ Country Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 ☐ Yes ☐ No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SEEMANN, ERNEST A Street Address (P.O. Box Number is Not Acceptable) 82 4729 DEL PRADO BLVD. CAPE CORAL FL 33904 83 84 City 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. Thereby accept the appointment as registered agent. Laminar with, and accept the obligations of, Section 607,0505, Florida Statutes. Signature, typical or printed name of registered agent and title it application 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1 1 TiTLE Change Addition ESSER, ROLF 1.2 NAME HYMGASSE 31 STREET AUCRESS 13 STREET ADDRESS 40549 DUESSELDORF, GERMANY CITY-S1-ZIP 14 (ITY - ST - 7iP THILE DELETE 2 1 TITLE ☐ Change Addition NAME 2.2 NAM-STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 24 CiTY-ST ZIP TITLE □ D€LE1E 3 1 Title Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CINC-ST-ZIP 3.4 C(T) - \$1 - Z(F) TIFLE DELETE 4 UTITLE ☐ Change ☐ Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - Z/P DILLE DELETE 5 1 TITLE 1000018224분대 -05/15/96--01050--012 Addition NAME 5.2 NAME 3 STREET ADDRESS 5.3 STREET ADDRESS ***200.00 CITY-ST-ZIF 5 4 CITY - ST - ZIP TITLE DELETE 6 1 TITLE ncitibbA 🔲 NAME 6.2 NAME STREET ADDRESS

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, i further certify that the information indicated on this annual report or supplement, angual report is true and accurate and that my signature shall have the same legal effect as if made under cath, that I am an officer or director of the corporator in this receiver. True to empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or

6.3 STREET ADDRESS

64 OffY-S1 ZIP

SIGNATURE:

CITY-ST-ZIF

Apr. 12th 36

(12/95)

CR2E034