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

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Saridra B. Mortnam

Secretary of State

DIVISION OF CORPORATIONS

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DOCUMENT #	P95000022089	(3

1. Corporation Name

BUDGET AIRCRAFT INTERIORS, INC.								
Principal Place of I	Rusiness	Mai	ling Address				168 11910 15016 8010: 18118 1811 1811	
7761 BAY CED			7761 BAY CEDAR D	RIVE				
ORLANDO FL			ORLANDO FL 32835					
						3. Date incorporated or Qualified 3a. D 03/15/1995	ate of Last Report	
2. Principal Place	of Business	2a.	Mailing Address			4. FEI Non ber	Applied For	
26						59-3303568	Not Applicable	
Suite, Apt. #, 6	etc.	27	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State			City & State		6. Election Campaign Financing	\$5.00 May Be Added to Fees		
3		28				Trust Fund Contribution 8. This corporation has liability for intangible		
Zip	Country	-	Zφ	Country 30		Florida Statutes Yes No	S (EX CITAGO O TOOTOO)	
4	9. Name and Address of Cur	29 rent Regist	tered Agent	1301		10. Name and Address of New Register	ed Agent	
	g, Marile and Address of Co.	TOTAL PROBLEM		81	Name			
AHMAD,	CYED A			82	Street Addi	ress (P.O. Box Number is Not Acceptable)		
7761 RA	Y CEDAR DRIVE				Olicer Fide			
	O FL 32835			83				
				84	City		85 Zip Code	
					<u></u>	ration submits this statement for the purpose of ind of directors. Thereby accept the appointmen	abancing its registered office	
SIGNATURE		ajest and the fi	TORS	NOTE. Repetered Apr	et signature exquire	ADDITIONS/CHANGES TO OFFICERS		
TITLE	0		☐ DELETE	1.111.5			- Grande	
NAME	AHMAD, SYED A			1.2 NAMÉ	T ADDRESS			
STREET ADDRESS	7761 BAY CEDAR DR. ORLANDO FL 32835			14 CITY	1			
CITY - ST - ZIP	D D D D D D D D D D D D D D D D D D D		☐ DELETE	2 1 TILL			☐ Change ☐ AdJition	
TITLE NAME	PEREZ, MARIO J			2.2 NAM6	ļ			
STREET ADDRESS	8709 TALL PINE LANE			23 STRF	TADDRESS			
CITY - ST - ZIP	ORLANDO FL 32817			2.4 GITY	ST-ZIP		Charige Addition	
TITLE			☐ DELETE	3 1 7111	1		C cualide C vacanon	
NAME				3.2 NAM				
STREET ADDRESS					ET ADDRESS			
CITY-ST-ZIF			DELETE	3 4 CiTy 4 1 Hft			Change Addition	
TITLE				4 2 NAM	1			
NAME .					ET ACIONESS			
STREET ADDRESS				4.4 CHY	1			
CITY - ST - ZIP TITLE			DELETE	5 1 11[[F		Change Addition	
NAME				5.2 NAM	F			
STREET ADDRESS				53 S1H	ET ADDRESS			
CITY-ST-ZIP			F 05.616	5.4 CITY 6.1 TH	- S1 - ZIP		Change Addition	
TITLE			☐ DELETE		ĺ	لــا على المان ا		
NAME	10			6.2 NAA 6.2 STR	EE! ADDRESS			
STREET ADDRESS				6.4.000	CT 71D			
CITY-ST-ZIP	cortifiction the information supp	oled with th	is filmo is vojuntarily l			y for the exemption stated in Section 119.07(3)(I trate and that my signature shall have the same	k), Florida Statutes, I further	
certify that	the information indicated on this am an officer or director of the Block 12 or block 13 if changes	s annua: rep convocation	or the receiver or tru	istee empowere	d to execute	this report as required by Chapter 607, Florida 9	Statutes and that my name	
SIGNAT	URE: SIGNATURE AND TY	PED OA PRINT	ED NAME OF SIGNING OF			Date:	Day to Premer	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR