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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUI	MENT # P9500	00028023 (6	3)			
.,	IC AIRCRAFT CORPORAT	ION .				
Principal Place of Business Mailing Address					T I DONE OF HIS FOUND BOND OF HIS OF	
2500 N.W. 62ND ST., HANGAR B 2500 N.W. 62ND ST., HA FORT LAUDERDALE FL 33309 FORT LAUDERDALE FL						
					3. Date Incorporated or Qualified 3a. 04/05/1995	Date of Last Report
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21	1				65-0573001	Not Applicable
Suite, Apt a	Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional
City & State	!	City & State	City & State		6. Election Campaign Financing	Fee Required \$5.00 May Be
23		28	, ·		1rust Fund Contribution	Added to Fees
Zip 24			Countr 30			No
	9. Name and Address of Curr	ent Registered Agent	61	т.,	10. Name and Address of New Registe	red Agent
COUNTY	T DOMAIN A			1		
SCHMIDT, RONALD A 2500 N.W. 62ND ST., HANGAR B			82	Street Addr	oddress (P.O. Box Number is Not Acceptable)	
	NUDERDALE FL 33309		83		<u> </u>	
f			84	City		85 Zip Code
				' '		FL
SIGNATURE	Signature, typed or printed name of registered age		OTE Registered Age		ation submits this statement for the purpose of of directors. I hereby accept the appointment of the directors of the directo	TE
TETLE	PTO	☐ DELETE	1. 1 TITLE			Change Addition
NAME	SCHMIDT, RONALD A		12 NAME			
STREET ADDRESS CITY+ST+ZIP	2500 N.W. 62ND ST., HANGAR B FORT LAUDERDALE FL 33309			T ADDRESS		
TITLE	VSD DELETE		1.4 CITY - : 2 1 TiTLE	ST-ZIP		☐ Change ☐ Addition
NAME	SCHMIDT, THOMAS A		2 2 NAME			Contract Contracts
STREET ADDRESS	2500 N.W. 62ND ST., HANG	SAR B	2.3 STREE	T ADDRESS		
C/1Y-S1-Z/P	FORT LAUDERDALE FL 333		2 4 C(TY -	ST-ZIP		
litté (☐ DELETE	3 1 TITLE			Change Addition
NAME STREET ADDRESS			3.2 NAME	T +0000000	Tipopo e trans	
CTY-ST-ZiP			3.4 CITY - 5	T ADDRESS	700001730 -03/04/9601028- ***200.00	-002
TITLE			4 1 TITLE	31-211	***200.00	Change Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY - S1 - ZIP				ST-ZIP		
DTLF		DELETE	5 1 TITLE			Change Addition
NAMÉ CIBLE L'ADOBECO			5.2 NAME			
STREET ADDRESS City+St+Zip			5 3 STREET	i i		
THE	DELETE		5.4 CITY - S 6. 1 TITLE	SI-ZIP	***************************************	☐ Change ☐ Addition
NAME .] Direct		6.2 NAME			☐ cutange ☐ repulicit
STREET ADDRESS			6 3 STREET	ADDRESS		
DITY-ST-ZIP			6.4 CITY - S	ST-ZIP		
14. I do hereby	certify that the information supplied	with this filing is voluntarily furn	ished and doe	s not qualify fo	or the exemption stated in Section 119.07(3)(k)	, 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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Konshill. S. L.A. PACS RONALD A. SCHNIOT 1/22/46
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date

95-Y-928-16-19 Daytine Phone I