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Apr 21, 1999 8:00 am
Secretary of State

04-21-1999 90173 041 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000029783

1. Corporation Name
SME-AERO, INC.

Principal Place of Business
3226 CAPITAL CIR SW
TALLAHASSEE FL 32310

Mailing Address
3226 CAPITAL CIR SW
TALLAHASSEE FL 32310

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 3240 CAPITAL CIR SW

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26 3240 CAPITAL CIR SW

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

3. Date Incorporated or Qualified

04/17/1995

4. FEI Number

59-3321826

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

LEDSON, RICHARD L
3226 CAPITAL CIR SW
TALLAHASSEE FL 32310

10. Name and Address of New Registered Agent

81 Name

LEDSON, RICHARD L

82 Street Address (P.O. Box Number is Not Acceptable)

3240 CAPITAL CIR SW

83

84 City

TALLAHASSEE

FL

85 Zip Code

32310

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME LEDSON, RICHARD L

STREET ADDRESS 3704 CARRINGTON PL

CITY-ST-ZIP TALLAHASSEE FL 32303

TITLE ☐ DELETE

NAME LEDSON, BENNA

STREET ADDRESS 3704 CARRINGTON PL

CITY-ST-ZIP TALLAHASSEE FL 32303

TITLE ☒ DELETE

NAME HASHIM, MOHAMED I

STREET ADDRESS NO.32 JALAN SS3/80

CITY-ST-ZIP 47300 PETALING JAYA

TITLE ☒ DELETE

NAME SIVAKUMARAN, S

STREET ADDRESS LOT 587/86

CITY-ST-ZIP JALAN WATERFALL NEW GREEN PA

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

RICHARD LEDSON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/99 850-575-9002

Date

Daytime Phone #

CR2E034 (1/98)