			•			· · · · · · · · <u> </u>	
-	PLEASE READ	ALL INS	TRUCTIONS BEFORE	COMPLETING	THIS FORM	(r) (	
FLO			DA DEPARTMENT OF STATE  Sandra B. Mortham  Secretary of State	FILES			
DOCUMENT # P9500030028				97 NOV 10 PM 3: 28			
DOCU  1. Corporal		SECRETARY OF STATE TALLAHASSEE, FLORIDA					
	ON AVIATION REPAIRS						
0539 BISCAY -900 IIAMI FL 931: IS	80	∕ús	represented the second state of the second s				
2. New Prin	cipal Office Address, If Applicable	New Mailing Office Address, If Applicable		Date Incorporated or Qualified     To Do Business in Florida     04/13/1995			
Sulte, Apt. #,	, etc.	Suite, Apt. #, etc.  City & State		5. FEI Number 65	-0591006	Applied For	
Žip Country		Zip	Zip Country		6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status		
7. Names and Street Addresses of Each Officer and/or Director (Floratile(s) Name of Officers and/or Directors			Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box Numbers)		City / State / Zip		
GÜCKMAN, LANA K		200 NW 107TH AVE		PEMBROKE PINES FL			
•			<b>Manager</b>	200i	0023467 -11/13/9701 ****165.00	7127 085004 ****165.00	
<i>b</i>					01110		
				0	· 0000		
8. Name and Address of Current Registered Agent Name				9. Name and Addre	ess of New Registered	Agent	
500 NW	IN, LANA K 107TH AVE			Street Address (P.O. Box Number is Not Acceptable)			
PEMBRO	KE PINES FL 33026		Suite, Apt. #, Etc	Suite, Apt. #, Etc.			
,			City		State <b>FL</b>	Zip Code	
0. I, being a	appointed the registered again of the	bove named corp	oration, am familiar with and accept the c	obligations of Section 60	7.0505, F.S.		

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Yes

REGISTERED AGENT MUST SIGN

SIGNATURE THANK MUCH MAN Pres.

11. This corporation owes or has paid the current year

Intangible Personal Property tax due June 30.

Signature of Registered Agent

//- /- 9// (

954) 9557 Daylime Phone #

(See other side for Information on Intangible tax.)

Per my conversation this marring with Leslie, I advised her that the \$55000 luas sent to the Oleft of Revenue in error. We are in the pracess of of thing the necessary form and refund.

I hadie advised me to send \$16500 to key the Carp.

Open.

Altached is the clear in that amount and the necessary form.

Deneerely Laux & Gleiknan Bres. Jachen Ametin Repaire Bre.