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FILED
Apr 03 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000046711 (4)
1. Corporation Name

AIRCRAFT INNOVATION & REPAIR SERVICES, INC.

Principal Place of Business

Mailing Address

3000 21ST STREET N.W.
WINTER HAVEN FL 33881

3000 21ST STREET N.W.
WINTER HAVEN FL 33881

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/15/1995

4. FEI Number

59-3295675

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

9. Name and Address of Current Registered Agent

MARTIN, LAURENCE
701 WOOD LANE
KISSIMMEE FL 34759

10. Name and Address of New Registered Agent

81 Name

PAUL M. FURNÉE, P/O

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

208 LAUREL COVE WAY

83

84 City

WINTER HAVEN

FL

85 Zip Code
33884

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

(NOTE: Registered Agent signature required when reinstating)

DATE

30 MAR. 1998

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE
NAME MARTIN, LAURENCE
STREET ADDRESS 701 WOOD LANE
CITY-ST-ZIP KISSIMMEE FL 34759

TITLE ☐ DELETE
NAME FURNÉE, PAUL
STREET ADDRESS 208 LAUREL COVE WAY
CITY-ST-ZIP WINTER HAVEN FL 33881

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 RICHARD PARISH
3.3 STREET ADDRESS 3000 21ST ST
3.4 CITY-ST-ZIP WINTER HAVEN, FL 33881

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME T/P PAULA FURNÉE
4.3 STREET ADDRESS 208 LAUREL COVE WAY
4.4 CITY-ST-ZIP WINTER HAVEN, FL 33884

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.

SIGNATURE:

[Signature]
PAULA FURNÉE TREAS

3/23/98

941-299-4655

CR2E034 (10/97)