FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P95000052437 (7)**

1. Corporation Name
AEROSPACE & ADVANCED TECHNOLOGIES, INC.

Principal Place of Business
8136 SE PALM HAMMOCK LANE
HOBE SOUND FL 33455

Mailing Address
8136 SE PALM HAMMOCK LANE
HOBE SOUND FL 33455

3. Date Incorporated/Qualified: 07/03/1995
3a. Date of Last Report:
4. FEI Number: 65-0609938 — 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 has liability for intangible tax under s. 199.032 Florida Statutes: [ ] Yes [X] No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent
PECORARO, RALPH
8136 SE PALM HAMMOCK LANE
HOBE SOUND FL 33455

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0501 and 607.0505, Florida Statutes, the undersigned corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The street address of its registered office and the name of its registered agent are identical to those of the officer or director listed below who is 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: _____ DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	RALPH PECORARO	[ ] DELETE
NAME	PRES	
STREET ADDRESS	8136 SE PALM HAMMOCK LN	
CITY-ST-ZIP	HOBE SOUND FL 33455	
TITLE	VICE PRES	[ ] DELETE
NAME	DAVID K M CHEW	
STREET ADDRESS	21-04 PEARL TOWER, 62 BAYSHORE	
CITY-ST-ZIP	SINGAPORE 1646	
TITLE	SECTY	[ ] DELETE
NAME	SOOK CHING CHEW	
STREET ADDRESS	21-04 PEARL TOWER, 62 BAYSHORE	
CITY-ST-ZIP	SINGAPORE, 1646	
TITLE	TREAS	[ ] DELETE
NAME	GERALDINE PECORARO	
STREET ADDRESS	8136 SE PALM HAMMOCK LN	
CITY-ST-ZIP	HOBE SOUND FL 33455	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '2

1. TITLE	[ ] Change	[ ] Addition
2. NAME		
3. STREET ADDRESS		
4. CITY-ST-ZIP		
5. TITLE	[ ] Change	[ ] Addition
6. NAME		
7. STREET ADDRESS		
8. CITY-ST-ZIP		
9. TITLE	[ ] Change	[ ] Addition
10. NAME		
11. STREET ADDRESS		
12. CITY-ST-ZIP		
13. TITLE	[ ] Change	[ ] Addition
14. NAME		
15. STREET ADDRESS		
16. CITY-ST-ZIP		
17. TITLE	[ ] Change	[ ] Addition
18. NAME		
19. STREET ADDRESS		
20. CITY-ST-ZIP		
21. TITLE	[ ] Change	[ ] Addition
22. NAME		
23. STREET ADDRESS		
24. CITY-ST-ZIP		

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this report is true, complete, and accurate, for the exception stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplement is and shall remain current 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 attached amendment, or on a separate rider.

SIGNATURE: Ralph Pecoraro — RALPH PECORARO — 3/27/96 — 407-781-4835
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone