FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

FILED

May 14 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000053880 (7)

L & H AIRCRAFT MAINTENANCE, INC.

Principal Place of Business		Mailing Address		
2633 LANTANA SUITE 20		8 SOUTH LAKESHORE D		
LANTANA FL 33462				
US				3. Date Incorporated or Qualified 07/10/1995 08/14/1996 08/14/1996
	ace of Business	2a. Mailing Address		4. FEI Number 65 - 0632177 Applied For
21		26		Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired See Required \$8.75 Additional Fee Required
City & State	9	City & State		6. Election Campaign Financing \$5.00 May Be
23 Zip	Country	28) 7m	Country	Trust Fund Contribution
24	25)	Zip 29	30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No
<u> </u>	9. Name and Address of Current		1301	10. Name and Address of New Registered Agent
FERRIN, MICHAEL J B1 Name				
1400 CENTREPARK BLVD.				ress (P.O. Box Number is Not Acceptable)
SUITE 909			62 Street Add	ress (n.o. Box Number is not Acceptable)
	T PALM BEACH FL		83	
			84 City	FL 85 Zip Code
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 Stuch 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 situal amplicable [NOTE: Registered Agent signature required when reinstating) OATE				
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DETEIE	111HLE] Change Addition
NAME	HATCHER, LARIS		1.2 NAME	
STREET ADDRESS	6 SOUTH LAKESHORE DRIVE		1.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	HYPOLUXO FL 33462	DELETE	1.4 C/TY - ST - Z/P 2.1 T/TLE	Change Addition
NAME	D Hatcher, Holly		2.2 NAME	C change C required
STREET ADDRESS	6 SOUTH LAKESHORE DRIVE		2.3 STREET ADDRESS	
CITY-ST-ZIP	HYPOLUXO FL 33462		2.3 STREET ADDRESS	
TOTLE	1111 020/10 12 00/02	DELE TE	31 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			34 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	Change Addition
NAME			4.2 NAME	
STREET ADORESS			4.3 STREFT ADDRESS	
CITY-ST-ZIP		Deter	4 4 CITY - ST - ZIP	
TITLE		☐ DELETE	5 1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP TITLE		DELETE	5.4 CITY+ST-ZIP 6.1 TITLE	Change Addition
NAME	I		6.2 NAME	Change Change
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY - ST - ZIP	
14. I do herel	by certify that the information supplied	with this filing does not qua	lify for the exemption state	d 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 eath; 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 attacklyment with an address.				