

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

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Feb 24 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000060228 (0)

1. Corporation Name
AERO PARTS SUPPORT U.S INC.



Paid check # 1047

Principal Place of Business
999 S. BAYSHORE DRIVE #2004
MIAMI FL 33131

Mailing Address
999 S. BAYSHORE DRIVE #2004
MIAMI FL 33131-2833

3. Date Incorporated or Qualified 07/17/1995	3a. Date of Last Report 08/20/1996
4. FEI Number 65-0584790	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 ☐ No	

2. Principal Place of Business 21 8627 NW 68th	2a. Mailing Address 26 Suite, Apt. #, etc.
22 City & State 23 Miami FL 33166	27 City & State 28
24 Zip 33166	29 Country USA

9. Name and Address of Current Registered Agent
PICO, ELISA
999 S. BAYSHORE DRIVE #2004
MIAMI FL 33131

10. Name and Address of New Registered Agent	
81 Name Hector Conde	85 Zip Code 33166
82 Street Address (P.O. Box Number is Not Acceptable) 8627 NW 68th	
83 City MIAMI FL	

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: _____ (NOTE: Registered Agent signature required when registering) DATE: _____

12. OFFICERS AND DIRECTORS	
TITLE	DP VP ☒ DELETE
NAME	DAPENA, HECTOR
STREET ADDRESS	999 S. BAYSHORE DRIVE #2004
CITY-ST-ZIP	MIAMI FL 33131
TITLE	President ☐ DELETE
NAME	Conde, Hector
STREET ADDRESS	8627 NW 68th
CITY-ST-ZIP	MIAMI FL 33166
TITLE	GRANDE, Modesto ☐ DELETE
NAME	999 S. Bayshore Drive #2004
STREET ADDRESS	MIAMI, FL 33131
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	
11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. I do 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: _____ DATE: 2-14-97 PHONE: 597-8885

CR2E034 (9/96)