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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT #

P95000068056 (7)

Corporation Name
 AIRCRAFT CLISTOM APPEARANCE INCORPORATED

AIRCHAFT CUSTOM APPEARANCE INCORPORATED					
Principal Place o 1321 SHARA OPA LOCKA	RAVE	Mailing Address 1321 SHADAR AVE. OPA LOCKA FL 83054		T 1980,980 ME 1890 SIIII SEUR SSIII SSIII	2013 2HE 1211 2313 3111 971 122
//		//		3. Date Incorporated or Qualified 3a. 09/05/1995	Date of Last Report
2. Principal Place 21	1 Opa Looka Blud. 2	2a. Mailing Address 6 P.O B Suite, Apt. #, etc.	ox sqojy3		Applied For Not Applicable \$8.75 Additional
22	2	1		5. Certificate of Status Desired	Fee Required
City & State	3	City & State		6. Election Campaign Financing	\$5.00 May Be
3 Opa	Lacker, + loid9 2		FLORIDA	Trust Fund Contribution	Added to Fees
コ ^{Zp} つ スケ	Country U.S.A. 2	9 33159	30 USA	8. This corporation has liability for intanging Florida Statutes Yes Yes	
4 330	g Name and Address of Current Re		1301 4314	10. Name and Address of New Registr	
	9. 144110 010 1101	3	81 Nanie		
GARC	K, MIGUEL		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	HARAR AVE.		62 Street Add	iress (F.O. Dox No. Hoor is No. Neder Rabie)	
	2CKA FL 33054		83		
			84 City		85 Zip Code
	1.			oration submits this statement for the purpose and of directors. Thereby accept the appointme	FL
SIGNATURE			the second of th		***
12.	Signature, typed or proper name of registere Taylor as it for OFFICERS AND DIF	RECTORS	Hegist-red Agent signature requi 13.	ADDITIONS/CHANGES TO OFFICERS	
	OFFICERS AND DIE		13. 1 1 Title		
12. TITLE NAME		RECTORS	13. 1 1 T/LE 12 NAME		S AND DIRECTORS IN 12
12. THE NAME STREET ADDRESS	OFFICERS AND DIE PRESIDENT MIGUEL GARCIA 1321 SHARAR AVE	4r CTORS □ DELĒTĒ	13. 1 1 TillE 1 2 NAME 1 3 STREET ADDRESS		S AND DIRECTORS IN 12
112. TITLE NAME STREET ADDRESS CHY+SI+ZIP	OFFICERS AND DIE PRESIDENT MIGUEL GARCIA	4FCTORS □ DELETE	13. 1 1 Tite 1 2 NAME 1 3 STREET ADDRESS 1.4 CHY+ ST-ZIP		S AND DIRECTORS IN 12 Change Addition
12. TIFLE NAME STREET ADDRESS CHY-ST-ZIP TIFLE	OFFICERS AND DIE PRESIDENT MIGUEL GARCIA 1321 SHARAR AVE	4r CTORS □ DELĒTĒ	13. 1 1 Title 1 2 NAME 1 3 STREET ADDRESS 1 4 CHY - ST - ZIP 2 1 TITLE		S AND DIRECTORS IN 12 Change Addition
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4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quary for the exemption stated in Section 119 or pixit, mind statutes from a 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 of 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 attaching with an address.

SIGNATURE:

NATURE OF TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)