

# ANNUAL REPORT

DOCUMENT # P95000081270

1. Entity Name  
AMERICAN & EUROPEAN AIRCRAFT SALES COMPANY



Principal Place of Business

2042 NW 100TH WAY  
CORAL SPRINGS, FL 33071 US

Mailing Address

2042 NW 100TH WAY  
CORAL SPRINGS, FL 33071 US

**FILED**  
**Apr 23, 2004 08:00 AM**  
**Secretary of State**



01132004 No Chg-P CR2E034 (10/03)

4. FEI Number  
65-0596898

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

VUCETIC, MIROSLAV  
2042 NW 100TH WAY  
CORAL SPRINGS, FL 33071

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

000000126443  
04/23/04-80034-010 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P VUCETIC, MIROSLAV 2042 NW 100TH WAY CORAL SPRINGS, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP VUCETIC, BOJANA 2042 NW 100TH WAY CORAL SPRINGS, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/04 954-720-0556