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

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # P97000

1. Corporation Name

AVIATION SERVICE CENTRE, INC. P97000016107 (9)

FILED May 11 1998 8:00am Secretary of State



Principal Place of Business			Mailing Address									
1725 W COMMERICAL BLVD #10 FT LAUDERDALE FL 33309			1725 W COMMERICAL BLVD #10 FT LAUDERDALE FL 33309					DO NOT WRIT	E IN THIS S	PACE.		
							<u> </u>	Date Incorporated or Qualified		FACE		
							3.	02/17/1997			-	
			11 10 4 11 11					FEI Number				
2. Principal Place of Business			2a. Mailing Address				4.		``		pplied For	
21			26)					65-0733420			ot Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5.	Certificate of Status Desired			Additional	
22			27								equired	
City & State			City & State					Election Campaign Financing	г		May Be	
23 Comto			Zip Country					Trust Fund Contribution	_ 니		to Fees	
Zip	Country						l l	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No				
24	[25]	29		30				Personal Property Tax due Jur Name and Address of New F			1 NO	
	9. Name and Address of Currer	it Hegisti	erea Agent		B1	Name		Marie and Address of New P	egistered i	-tyent		
ROMEISER, EDWARD W					["]	Name	<i>;</i>					
1725 W COMMERICAL BLVD #10 FT LAUDERDALE FL 33309						Street	l Address (P.	dress (P.O. Box Number is Not Acceptable)				
					B3							
					84	City				85 Zip	Code	
					1	•			<u>FL</u>			
11. Pursuant t	o the provisions of Sections 607.050 egistered agent, or both, in the State	2 and 60	7.1508, Florida Stat	tutes, the a	bove	-named	d corporation	n submits this statement for the	purpose of	changing	its registered	
agent, t ar	agistered agent, or both, in the state in familiar with, and accept the oblig	ations of,	Section 607.0505,	s aumonze Florida Sta	lules	the con	rporanon's p	loard of directors. Thereby acc	etir me abb	Ontanent as	s registered	
SIGNATURE	•											
SIGNATIONE .	Signature, typed or printed name of registered age	ont and title d	fapsteable (N	OIL Registere	d Age	nt signature	re required when i		DATE			
12.	OFFICERS AN	D DIREC		13.			A	ADDITIONS/CHANGES TO OFF	ICERS AND			
TITLE	D		DELETE	1.1 T	ITLE					Change	Addition	
NAME	Romeiser, Edward W			1.2 N	IAME							
STREET ADDRESS	1725 W COMMERICAL BLVD		1.3 STREET ADDRES									
CITY-ST-ZIP	FT LAUDERDALE FL 33309			1.4 0	ITY-S	T - ZIP						
TITLE			☐ DELETE	2.11	ITLE					☐ Change	Addition	
NAME				2.2 N	IAME		•					
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CITY-ST-ZIP					CHTY-S							
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NAME				3.2 N			}					
STREET ADDRESS						ADDRESS						
					CITY-S							
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NAME	•					4D00500					ļ	
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NAME				5.2 N							ĺ	
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NAME				6.2 N	AME							
STREET ADDRESS				6.3 \$	TREET	ADDRESS					Į	
CITY-ST-ZIP	_				ITY-\$							
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I necepy certify that the information supplied with this filling 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.