


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1052

**FILED**  
**Nov 14, 2000 8:00 A.M.**  
**Secretary of State**

<b>CORPORATION</b> 98-00 UBR			<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT #</b> <b>PA7000031027</b>				
1. Corporation Name <b>ATLAS AIRCRAFT ACQUISITION CORP.</b>				
2. Principal Office Address <b>2321 SW. 21<sup>ST</sup> ST</b>		3. Mailing Office Address <b>2321 SW. 21<sup>ST</sup> ST.</b>		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		
City & State <b>MIAMI, FL</b>		City & State <b>MIAMI, FL</b>		
Zip <b>33145</b>	Country <b>DADE</b>	Zip <b>33145</b>	Country <b>DADE</b>	

4. Date Incorporated or Qualified To Do Business in Florida <b>04/07/1997</b>	
5. FEI Number <b>050754148</b>	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent			
Name <b>ROBERT L. MASSON</b>		<b>700003491257-9</b>	
Street Address (P.O. Box Number is Not Acceptable) <b>2321 SW. 21<sup>ST</sup> ST.</b>		<b>-12/08/00--01012--02</b>	
Suite, Apt. #, Etc.		<b>****450.00 ****450.00</b>	
City <b>MIAMI</b>		State <b>FL</b>	Zip Code <b>33145</b>

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

**Robert Masson**

Date **10/19/00**

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	ROBERT MASSON	2321 SW. 21 <sup>ST</sup> ST.	MIAMI, FL 33145

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

**Robert Masson**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**10/19/00 3059873815**

Date

Daytime Phone #

CR2E081 (9/99)

2052

**Atlas Aircraft Acquisition Corporation**  
**2321 SW. 2<sup>nd</sup> Street**  
**Miami, Fl. 33134**  
**Tel. (305) 860 1973**

Florida Department of State  
George Firestone BLD.  
401 East Gaines St.  
Tallahassee, Fl 32314

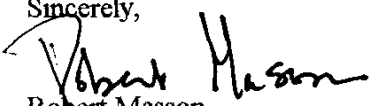
October 20, 2000

Dear Sirs:

Much to our dismay, we discovered several days ago during our court case that Atlas Aircraft was no longer current. After speaking with your department's specialist we discovered the problem, namely that we had never received any notification from the state since 1998, probably due to errors in address.

We request therefore that the late fees be waived. Enclosed is \$450.00 as advised for the reinstatement fee for the corporation.

Sincerely,

  
Robert Masson  
President AAAC