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

PROFIT CORPORATION ANNUAL REPORT

1998

BISHOP, BRIAN S 11480 SANDY RUN

JUPITER FL 33478

22



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000050181 (1)

BISHOP AIRCRAFT SERVICES, INC.

Principal Place of Business	Mailing Address			
11480 SANDY RUN JUPITER FL 33478	11480 SANDY RUN JUPITER FL 33478			

9. Name and Address of Current Registered Agent

11480 Suite, Apt. #, etc.

8. Election Campaign Financing Trust Fund Contribution 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent Name

Street Address (P.O. Box Number is Not Acceptable)

5. Certificate of Status Desired

3. Date Incorporated or Qualified

06/06/1997

83 Zip Code

FILED

Apr 23 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

Applied For Not Applicable

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

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

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SIGNATURE			required when reinstating) DATE	78
		O1E Registered Agent signature		
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	
TITLE	PST DELETE	1.1 TITLE	Change	Addition
NAME	BISHOP, BRIAN S	1,2 NAME		
STREET ADDRESS	11480 SANDY RUN	1.3 STREET ADDRESS		
CITY-ST-ZIP	JUPITER FL 33478	1.4 CITY - ST - ZIP		
TITLE	DELETE	2.1 TITLE	Change 🗀	Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY+ST-ZIP	<u>.</u>	2. 4 CITY - ST - ZIP		
TITLE	DELETE	3.1 TITLE	L'' Change	Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY - ST - ZIP		
TITLE	☐ DELET E	4 1 TITLE	☐ Change ☐	Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY - S1 - ZIP		
TITLE	DELETE	5.1 TITLE	☐ Change ☐	Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY- ST- ZIP		
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐	Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
A.T. AT S.D.		0.4 DUTA DT 71D		i

14. Thereby 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.