FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** CORPORATION NUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000057950 (2)

RELIABLE AIRCRAFT MAINTENANCE, INC.

FILED Apr 09 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Addres				I BINA KODIN IZADI ZINI MENU INDI
1333 PINE AVE., SUITE C		•				
ORLANDO FL 32824		1333 PINE AVE BUITE C ORLANDO FL 32824			DO NOT WHITE IN THIS SPACE	
					3. Date Incorporated or Qualified	IS SPACE
					06/30/1997	
2. Principal P	lace of Business	2a. Mailing Add	dress		4. FEI Number	Applied For
21		26			59-3455444	Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	e	City & State	1		6. Election Campaign Financing	\$5.00 May Be
23	_	28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip		Country	8. This corporation owes or has paid the	
24	25 9. Name and Address of Cu	29	3	0	Personal Property Tax due June 30. 10. Name and Address of New Registers	Yes No
	ELLYAR, DENNIS	Metir vadiereten ydeur		81 Name	10. Name and Address of New Hegisters	oo Agent
	25 SYCAMORE DRIVE					
	RLANDO FL 32803			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
J 1				83		
				84 City		85 Zip Code
		····		- 1	F	L
office or re agent. I ar	egistered agent, or both, in the s m familiar with, and accept the c	State of Florida. Such cha	anne was au	thorized by the coroora	rporation submits this statement for the purpose ation's board of directors. I hereby accept the a	ppointment as registered
SIGNATURE .	Signature, typed or printed name of registers	ed agent and tille it applicable.	(NOTE: I	Registered Agent signature requ	uired when reinstanng) DATE	
SIGNATURE .	OFFICERS	AND DIRECTORS		Registered Agent signature requ	uired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
12. TITLE	OFFICERS PD	AND DIRECTORS	(NGTE: I DELETE	13. 1 1 TITLE		ND DIRECTORS IN 12
12. TITLE NAME	PD Kenneth Lee	S AND DIRECTORS		13. 11 TITLE 12 NAME		ND DIRECTORS IN 12
12. TITLE NAME STREET ADDRESS	PD Kenneth Lee 6036 Fountain	S AND DIRECTORS Palm Dr.		13. 11 TITLE 1.2 NAME 1.3 STREET ADDRESS		ND DIRECTORS IN 12
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	FD Kenneth Lee 6036 Fountain Jupiter, Flori	Palm Dr. ida 33458		13. 11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		ND DIRECTORS IN 12 Change Addition
12. TITLE NAME STREET ADDRESS	FD Kenneth Lee 6036 Fountain Jupiter, Flori	Palm Dr. ida 33458	DELETE	13. 11 TITLE 1.2 NAME 1.3 STREET ADDRESS		ND DIRECTORS IN 12 Change Addition
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