

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

FILED
May 17, 1999 8:00 am
Secretary of State

05-17-1999 90090 020 ***158.75

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 947 0000 77617 ✓

Corporation Name

AMERICAN AIRCREWS INTERNATIONAL INC

556603 - 90090 - 20

Principal Place of Business

Mailing Address

1021 OBISPO ST.
CORAL GABLES FL 33134

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

09-08-97

4. FFI Number

65-078-1441

Applied For
FBI/ATF

5. Beneficiary of Dividend Contract

✓

\$8.75 Additional
fee Required

6. Election Campaign Financing
Trust Fund Contribution

□

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible
Personal Property Tax.

Yes

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81. Name

JOHN MERANI

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

3863 FALCON RIDGE CIRCLE

84. City

WESTON

FL

85. Zip Code
33331

SIGNATURE

JOHN MERANI

04-28-99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DIRECTOR ☐ DELETE

NAME JORGE LONDA
STREET ADDRESS 1021 OBISPO ST.
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE DIRECTOR ☐ DELETE

NAME JOHN MERANI
STREET ADDRESS 3863 F
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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 or shareholder or creditor or trustee or beneficiary of the corporation or trust or partnership or other entity, and that my name appears in Block 12 of Block 13 of this report, and that I am on attachment with an affidavit, and that I am on attachment with an affidavit.

JOHN MERANI

04-28-99

(954) 3891044

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