SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P97000099961 (9)

AIRCRAFT ACCESSORIES, INC.

FILED Sep 24 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				-	
8525 NW 66 STREET MIAMI FL 33166	8525 NW 66 STREET MIAMI FL 33166	5 NW 66 STREET			
					DO NOT WRITE IN THIS SPACE
					3. Date incorporated or Qualified 11/24/1997
2. Principal Place of Business 2a. Mailing Address				,	4. FEI Number Applied For
21 26					650805242 Not Applicable
Sulte, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired \$8.75 Additional Fee Required
27					Election Campaign Financing \$5.00 May Be
23					Trust Fund Contribution Added to Fees
Zip Country	Zip	Coun	try		8. This corporation owes or has paid the current year Intangible
2425	29	30			Personal Property Tax due June 30. 🔀 Yes 🗍 No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
			81 Name		
8525 NW 66 STREET			B2 S1	Street Address (P.O. Box Number is Not Acceptable)	
MIAMI FL 33166					
			83		
		į.	84 Ci	ity	85 Zip Code
					FL. T.
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.					
SIGNATURE Signature, typed or printed name of registered agent an	id title if applicable. (Ne	OTE: Registere	d Agent s	signature require	od when reinstating) DATE
12. OFFICERS AND I	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D	DELETE	1.1 TITL	E		Change Addition
NAME MAIDAGAN, IVONNE			E		
STREET ADDRESS 8525 NW 66 STREET			ET ADDA	RES\$	
CITY-ST-ZIP MIAMI FL 33166	100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		ST-ZIP		
TITLE PD	DELETE	2.1 TITL	E		Change Addition
NAME HORTA, BERTA			E		·
2	·		ET ADDR	ES\$	
CITY-ST-ZIP MIAMI FL 33166		2.4 CITY		.,	
TITLE VD	DELETE	3.1 TITLI	E		Change Addition
NAME DIAZ, CLAUDIA		3.2 NAM	Ε		
STREET ADDRESS 8525 NW 66 STREET			ET ADDR	RESS	
CITY-ST-ZIP MIAMI FL 33166	Г=1-	3.4 CiTY			
LODES MEDOFDEO	DELETE	4.1 TITLE			Change Addition
OSOS ANALOO OTDEET		4.2 NAM			
MARK EL 20100		4.3 STRE		RESS	
		4.4 CITY		TE	
CANOLIET LUICA	L DELETE		5.1 TITLE		Change Addition
DEAR NEW AS STORET		5.2 NAM		SA	NCHEZ, LUCIA 525 NW 66 STREET
ANALU EL DOTOD		5.3 STRE		(ESS 85	525 NW 66 STKEE!
		5.4 CITY		M_	MMI FC 33166
TITLE	L DELETE	6.1 TITLE			L Change L Addition
NAME		6.2 NAM			
STREET ADDRESS		6.3 STRE		ESS	İ
CHY-ST-ZIP 14. I haveby certify that the information supplied with thi	s filing does not qualify for th	6.4 CITY		ed in section	n 119.07(3)(i), Florida Statutes, I further certify that the information

indicated on this annual report or supplemental annual goost 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.

12 Carl Carl Lino

IN OCHUPIA DIAZ

9/12/98

(305) 436-0404