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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90085 032 ***150.00

DOCUMENT # P9800000026

1. Corporation Name

AVIATION COMPONENTS TECHNOLOGY, INC.						<u> </u>			
		· - 		~	- 				
Principal Plac	e of Business	Mailing Address				1 (60) (00) (10 (0) (10) (6) (10)	III 46) 14 6	8131 58 311 40 11	4 1001 0 (01) (13)
2358 WEST 8TI		2358 WEST 8TH LANE							
HIALEAH FL 33		HIALEAH FL 33010							
						DO NOT WRIT	E IN THIS	SPACE	
						3. Date Incorporated or Qualifed		•	
						12/31/1997			
Principal P	lace of Business	2a. Mailing Address				4, FEI Number			pplied For
1		26				65-0801568	75 555 15		ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	tc.			5. Certifcate of Status Desired			Additional equired
2		27							
,		City & State	y & State			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			•
3	Zip Country Zip		Country			Trust Fund Contribution			to rees
Zip	r '	- 	30	iu y		 This corporation owes the current Personal Property Tax. 	ent year inta	ingibie ∐Yes	□No
1	9. Name and Address of Cur	29 Agent	30			10. Name and Address of New R	egistered A		
	5. Maine and Address of Cur	tout vedisteren währe		81 Nam	e	IG. Hallie and Houses of Hen I	- g vu r	-3	
ANG	IULO, DELIA		J				 		
	I-SW-129TH-AVE			82 Street Address (P.O. Box Number is Not Acceptable)					
MIAN	WI FL 33175			83				====	
				84 City			FL	85 Zip	Code
12.	Signature, typed or printed name of registered OFFICERS	AND DIRECTORS	13.	Agent signatu	e required v	when reinstating) ADDITIONS/CHANGES TO OFF	DATE ICERS AN	D DIRECTO	ORS IN 12
TITLE	P	☐ DELETE	1.1 TIT	ιε				Change	Addition
NAME	ANGULO, DELIA		1.2 NA	ME	1			,	
STREET ADDRESS	4001 S.W. 129 AVE				ł				
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TITLE					ss				
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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 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, with all other like empowered.

SIGNATURE: