

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 04, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P98000016155**

1. Entity Name

QUALITY AIRCRAFT SALES, INC.



Principal Place of Business

399 NW 2ND AVENUE  
BOCA RATON, FL 33432

Mailing Address

399 NW 2ND AVENUE  
BOCA RATON, FL 33432

**DO NOT WRITE IN THIS SPACE**



01162008 No Chg-P CR2E034 (11/05)

4. FEI Number

65-0818323

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

WHEELER, CHRISTOPHER C  
2255 GLADES ROAD  
SUITE 340W  
BOCA RATON, FL 33431

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D  
NAME SCHMIDT, RICHARD L  
STREET ADDRESS 399 NW 2ND AVENUE  
CITY-ST-ZIP BOCA RATON, FL 33432

TITLE  
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04/15/08-80067-014 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Richard L Schmidt*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-2-08 (561) 392-4717

Date

Daytime Phone