

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000022603

1. Entity Name

USA AVIATION SALES, INC.

FILED
Mar 27, 2000 8:00 am
Secretary of State

03-27-2000 90118 018 ***150.00

Principal Place of Business

930 S HARBOR CITY BLVD. SUITE 400
MELBOURNE FL 32901

Mailing Address

930 S HARBOR CITY BLVD. SUITE 400
MELBOURNE FL 32901-1963

2. Principal Place of Business

158 N. Harbor City Blvd.

Suite, Apt. #, etc.

3. Mailing Address

158 N. Harbor City Blvd.

Suite, Apt. #, etc.

City & State
Melbourne, FL

City & State
Melbourne, FL

4. FEI Number 59-3498033

Applied For

Not Applicable

Zip
32935

Country
US

Zip
32935

Country
US

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ANDERSON, J PATRICK
930 S HARBOR CITY BLVD, SUITE 400
MELBOURNE FL 32901

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME LOVE, RICHARD P JR
STREET ADDRESS 930 S HARBOR CITY BLVD, SUITE 400
CITY-ST-ZIP MELBOURNE FL 32901

TITLE VTS ☐ Delete
NAME SMITH, RALPH W
STREET ADDRESS P O BOX 410485 N/A
CITY-ST-ZIP MELBOURNE FL 32941-0485

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Richard P. Love, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard P. Love, Jr. 3/20/00 (321)751-9320

Date

Daytime Phone #

CR2E034 (9/99)