OCUMENT #	P98000028597

1. Entity Name

AIRCRAFT 23345, INC.

Principal Place of Busine	988	
UNICAPITAL CORPORATI	ON	
10800 BISCAYNE BLVD.	STE	800
MIAMI FL 33161		
US		

Mailing Address

UNICAPITAL CORPORATION LAW DEPT. 10800 BISCAYNE BLVD. STE 800 MIAMI FL 33161

US



Suite, Apt. #, etc. Stres I will be \$5-0823633 Applied For Not Applicable Not Applicable Set. You Applicable Set. You Applicate of Status Desired Set. Set. Po. Box Number is Not Acceptable) Suite, Apt. #, etc. Stres I will be \$50.00 After May 1, 2002 Fee will be \$50.00 Trust Fund Contribution. DO NOT WRITE IN THIS SPACE Applied For Not Applicable Set. You Applicable Not Applicable Set. You Applicate of Status Desired Status Desired Set. Set. You Applicate of Set. Set. You Applicate of Status Desired Set. Set. You Applicate of Status Desired Set. Set. You Applicate of Status Desired Set. Set. You Applicate of Set. Set. You Applicate
Suite, Apt. #, etc. 2080) Biscaure Siva. Siz. 903 City & State Aventura FL Zip Country 33(80) SKYWATCH REGISTERED AGENTS, INC. 10800 BISCAYNE BLVD., LAW DEPT. #800 MIAMI FL 33161 Suite, Apt. #, etc. 2080) Siscaure Siva. Siz. 903 City & State Aventura FL Country 33(80) USA 7. Name and Address of New Registered Agent Name SKYWATCH REGISTERED AGENTS, INC. 10800 BISCAYNE BLVD., LAW DEPT. #800 MIAMI FL 33161 Signature, lyoed or printed name of registered agent and title if applicable. Signature, lyoed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating) 10. Election Campaign Financing \$5.00 May Between 1000 Financing
City & State Aventura FC Scountry 33 (80) Signature. typed or printed name of registered agent and bitle it applicable. City & State Aventura FC Scountry Signature. Status Desired St
City & State Aventure Tip Country Zip Country Zip Country 33 (80) Country S8.75 Additional Fee Required Fee Required Fee Required Fee Required Name SKYWATCH REGISTERED AGENTS, INC. Street Address (P.O. Box Number is Not Acceptable) 2080 Sizeaune Street Address (P.O. Box Number is Not Acceptable) 2080 Sizeaune City Aventure FL Zip Code 33 (80) 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 latter it applicable. (NOTE: Registered Agent signature required when relinstating) DATE 10. Election Campaign Financing \$5.00 May Be Tay Signature and clock to do co. Attention Attention 10. Election Campaign Financing \$5.00 May Be
Skywarch Registered Agent Name Name Skywarch Registered Name Name Skywarch Registered Name Name Skywarch Registered Name Name Skywarch Registered Name Nam
SKYWATCH REGISTERED AGENTS, INC. 10800 BISCAYNE BLVD., LAW DEPT. #800 MIAMI FL 33161 Signature, typed or printed name of registered agent and title if applicable. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. Signature, typed or printed name of registered agent and title if applicable. Name SKYWATCH REGISTERED AGENTS, INC. Street Address (P.O. Box Number is Not Acceptable) 2080) Siscaupe Sivra FL Zip Code 33.180 DATE 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 FILE NOW!!! FEE IS \$150.00 Tog files requirement and elected of So. 10. Election Campaign Financing \$5.00 May Be
6. Name and Address of Current Registered Agent SKYWATCH REGISTERED AGENTS, INC. 10800 BISCAYNE BLVD., LAW DEPT. #800 MIAMI FL 33161 City City Signature, typed or printed name of registered agent and bitle if applicable. SIGNATURE Signature, typed or printed name of registered agent and bitle if applicable. Name SKYWATCH REGISTERED AGENTS, (NC., Street Address (P.O. Box Number is Not Acceptable) 20801 Siscaupe Slund. City Avenue: Signature, typed or printed name of registered agent and bitle if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Tognificance numbers and elected to do no. After May 1, 2002 Fee will be \$550.00 10. Election Campaign Financing \$5.00 May Be
SKYWATCH REGISTERED AGENTS, INC. 10800 BISCAYNE BLVD., LAW DEPT. \$800 MIAMI FL 33161 Street Address (P.O. Box Number is Not Acceptable) 20801 Siscaume Silva City Aventure FL Zip Code 33160 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 it applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible Tog filter required many and plants to do so. After Mexit 2002 Fee will be \$550.00 10. Election Campaign Financing \$5.00 May Be
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Street Address (P.O. Box Number is Not Acceptable) 2080
#800 MIAMI FL 33161 Suite 40.3 City Aventure FL Zip Code 33180 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 it applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Tow filter requirement and elects to do so. After May 1, 2003 Fee will be \$550.00
MIAMI FL 33161 City Aventure 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 it applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible Tow filter requirement and elects to do so. After Hay 1, 2002 Fee will be \$550.00 10. Election Campaign Financing \$5.00 May Be
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9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Toy files requirement and elects to do so. After Heart 2002 Fee will be \$550.00
Toy filing requirement and electe to do so. After New 1, 2003, Eac will be \$550.00
Toy filing requirement and electe to do so. After New 1, 2003, Eac will be \$550.00
Trust Fund Contribution Added to Fees
(See criteria on back) Make Check Payable to Department of State
11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE CPD Delete TITLE DIRECTOR, PRESIDENT Change Addition
POINTELL E T
STREET ADDRESS 10800 BISCAYNE BLVD., #800 STREET ADDRESS 2039 North lake Parkway
CITY-ST-ZIP MIAMI FL 33161 CITY-ST-ZIP TUCLES, GA 30084
TITLE VT Delete TITLE SChange Addition
NAME CHAIT, DANIEL M NAME 20801 Biscayne 64d., Ste. 403
STREET ADDRESS 10800 BISCAYNE BLVD., #800 STREET ADDRESS Are ITURE TO 33180
CITY-ST-ZIP MIAMI FL 33161 CITY-ST-ZIP
TITLE V □ Delete TITLE ☑ Change □ Addition
NAME SHERMAN, STEVE NAME
STREET ADDRESS 10800 BISCAYNE BLVD., #800 STREET ADDRESS 20801 Biscaure Blvd., Ste. 403
CITY-ST-ZIP MIAMI FL 33161 CITY-ST-ZIP Aventura, FL 33180
TITLE V Delete TITLE NON-EXPECUTIVE EMPLOYEE Change Addition
NAME VORRATH DAVID
STREET ADDRESS 10800 BISCAYNE BLVD., #800 STREET ADDRESS 20801 GISCAYNE Blvd., JE . 403
CITY-ST-ZIP MIAMI FL 33161 CITY-ST-ZIP Aventura, EL 331800
TITLE S Delete TITLE CFO, TREASURER Change Addition
NAME KALR MARTIN
STREET ADDRESS 10800 BISCAYNE BLVD., #800 STREET ADDRESS 2059 North lake Parkway
CITY-ST-ZIP MIAMI FL 33161 CITY-ST-ZIP TUCKER, GA 30084
TITLE AS Delete TITLE SECRETARY Change Addition
NAME TRIMMER, TERI NAME MARK ANDERSON
STREET ADDRESS 10800 BISCAYNE BLVD., #800 STREET ADDRESS 2059 NOTTH Calce Parkway
CITY-ST-ZIP MIAMI FL 33161 CITY-ST-ZIP Tucker, GA 30084-

13. Thereby 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:

Daytime Phone #