

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2004 8:00 am
Secretary of State

04-22-2004 90049 013 ***150.00

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1. Entity Name
AVIATION PRODUCTS INTERNATIONAL, INC.



34060773

Principal Place of Business
340 ROYAL PLAM WAY, STE 101
PALM BEACH, FL 33480

Mailing Address
340 ROYAL PLAM WAY, STE 101
SUITE 223
PALM BEACH, FL 33480

2. Principal Place of Business

340 Royal Palm way
Suite, Apt. #, etc.
Suite 101

3. Mailing Address

340 Royal Palm way
Suite, Apt. #, etc.
Suite 101

City & State

Palm Beach, FL
Zip
33480

City & State

Palm Beach, FL
Zip
33480

04082004

Chg-P

CR2E034 (10/03)

4. FEI Number
65-0843672

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

VALDES-FAULI CORPORATE SERVICES, INC.
777 S. FLAGLER DRIVE
SUITE 500 EAST
WEST PALM BEACH, FL 33401

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. 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, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PST ☐ Delete
NAME COOK, MARK W
STREET ADDRESS 340 ROYAL PLAM WAY, STE 101
CITY-ST-ZIP PALM BEACH, FL 33480

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PST ☒ Change ☐ Addition
NAME Cook, mark w.
STREET ADDRESS 340 Royal Palm way, Ste 101
CITY-ST-ZIP Palm Beach, FL 33480

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

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Mark W. Cook

4/20/04

561-837-8623