Applied For Not Applicable

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

☐ Yes

[XNo

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P98000055794

1. Corporation Name

AERO-MAINTENANCE, INC.

VIVIES, PATRICK

Mailing Address Principal Place of Business 700 EAST DANIA BEACH BOULEVARD 700 EAST DANIA BEACH BOULEVARD SUITE 202 SUITE 202 DANIA FL 33004 DANIA FL 33004 2a. Mailing Address 2. Principal Place of Business 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. 27 22 City & State City & State 28 23 Country Zir Country 30 24 25 29 9. Name and Address of Current Registered Agent

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90246 017 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

6. Election Campaign Financing

This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

06/22/1998

FEI Number

700 EAST DANIA BEACH BOULEVARD			Street	Address (P.O. Box Number is Not Acceptable)	
SUITE 202				A CONTRACT C	
DANIA FL 33004					
		84	City	FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
12. OFFICERS AND DIRECTORS 13.				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD DELETE 1	1,1 TITLE		Vice president Change X Addition	
NAME	VIVIES, PATRICK	2 NAME		Evangelina Romero-Merin	
STREET ADDRESS	THE STATE OF THE PERSON NAMED IN THE PARTY AND	.3 STREET	ADDRESS		
CITY-ST-ZIP	DANIA FL 33004	I.4 CITY-\$1	-ZIP	Dania,FL 33004	
TITLE	☐ DELETE 2	1 TITLE		Change Addition	
NAME	2	2 NAME			
STREET ADDRESS	2	3 STREET	ADDRESS		
CITY-ST-ZIP	2	2.4 CITY-S	T-ZIP		
TITLE	☐ DELETE 3	3.1 TITLE		☐ Change ☐ Addition	
NAME	3	3.2 NAME			
STREET ADDRESS	3	3.3 STREET	ADDRESS	,	
CITY-ST-ZIP		3.4. CITY-S	r-ZIP		
TITLE	☐ DELETE 4	11 TITLE		☐ Change ☐ Addition	
NAME	4	. 2 NAME			
STREET ADDRESS	•	.3 STREET	ADDRESS		
CITY-ST-ZIP	4	.4 CITY-ST	-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition	
NAME	•	5.2 NAME			
STREET ADDRESS	5	3.3 STREET	ADDRESS	·	
CITY-ST-ZIP		4 CITY-ST	- Z!P		
TITLE	beech	3,1 TITLE		☐ Change ☐ Addition	
NAME	•	3.2 NAME			
STREET ADDRESS		3.3 STREET	ADDRESS		
CITY-ST-ZIP		6.4 CITY- \$1			
14 hereby c	certify that the information supplied with this filing does not qualify for the	exempti	on stated	d 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 assurate 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 empowers as equired 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. Light other like empowered.

SIGNATURE: