

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P98000058625**
Corporation Name

QUALITY AIRCRAFT ENGINES, INC.

Principal Place of Business
**NORTH AUGUSTA DRIVE
MIAMI FL 33015**

Mailing Address
**7325 NORTH AUGUSTA DRIVE
MIAMI FL 33015**

FILED
Sep 15, 1999 8:00 am
Secretary of State

09-15-1999 90005 029 ***550.00



DO NOT WRITE IN THIS SPACE

Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
NORTH AUGUSTA DRIVE MIAMI FL 33015		7325 NORTH AUGUSTA DRIVE MIAMI FL 33015		07/01/1998	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
27		28		65-0851177	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
28		29		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip		Country		8. This corporation owes the current year Intangible Personal Property. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
25		30			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
GANTT, RAGAN CPA 8220 SUNSET DRIVE MIAMI FL 33143				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				FL 85 Zip Code	

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.

NATURE		Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)		DATE	
		OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
		<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
ET ADDRESS		D BELTRAN, DIEGO		1.1 TITLE			
ST-ZIP		7325 NORTH AUGUSTA DRIVE		1.2 NAME			
		MIAMI FL 33015		1.3 STREET ADDRESS			
				1.4 CITY-ST-ZIP			
		<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
ET ADDRESS		D BELTRAN, DIEGO R		2.1 TITLE			
ST-ZIP		7325 NORTH AUGUSTA DRIVE		2.2 NAME			
		MIAMI FL 33015		2.3 STREET ADDRESS			
				2.4 CITY-ST-ZIP			
		<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
ET ADDRESS				3.1 TITLE			
ST-ZIP				3.2 NAME			
				3.3 STREET ADDRESS			
				3.4 CITY-ST-ZIP			
		<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
ET ADDRESS				4.1 TITLE			
ST-ZIP				4.2 NAME			
				4.3 STREET ADDRESS			
				4.4 CITY-ST-ZIP			
		<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
ET ADDRESS				5.1 TITLE			
ST-ZIP				5.2 NAME			
				5.3 STREET ADDRESS			
				5.4 CITY-ST-ZIP			
		<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
ET ADDRESS				6.1 TITLE			
ST-ZIP				6.2 NAME			
				6.3 STREET ADDRESS			
				6.4 CITY-ST-ZIP			

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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

GNATURE:

Diego Beltran 9/9/99 305-681-0160
SIGNATURE REQUIRED

CR2E034 (5/99)