

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2000 8:00 am
Secretary of State

04-11-2000 90014 002 ***150.00

DOCUMENT # P98000098021

1. Entity Name

JRD AIRCRAFT REPAIR AND MODIFICATION SERVICE, IN

Principal Place of Business

Mailing Address

**15014 S.W. 130TH COURT
 MIAMI FL 33186**

**15014 S.W. 130TH COURT
 MIAMI FL 33186-6384**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0874991

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BOZA, JUAN M
 15014 S.W. 130TH COURT
 MIAMI FL 33186**

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

Rodolfo Munoz

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

(NOTE: Registered Agent signature required when reinstating)

3-29-2000

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D <input type="checkbox"/> Delete	TITLE	P <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BELTRAN, DINO	NAME	MUNOZ, RODOLFO
STREET ADDRESS	181 N.W. 97TH AVENUE, SUITE 510	STREET ADDRESS	181 N.W. 79 AV. SUITE 2D
CITY-ST-ZIP	MIAMI FL 33172	CITY-ST-ZIP	MIAMI FL 33166
TITLE	D <input type="checkbox"/> Delete	TITLE	V <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOZA, JUAN M	NAME	BELTRAN, DINO
STREET ADDRESS	15014 S.W. 130TH COURT	STREET ADDRESS	181 N.W. 97 AV SUITE 510
CITY-ST-ZIP	MIAMI FL 33186	CITY-ST-ZIP	MIAMI FL 33172
TITLE	D <input type="checkbox"/> Delete	TITLE	V <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MUNOZ, RODOLFO	NAME	BOZA JUAN M
STREET ADDRESS	4174 N.W. 79TH AVENUE, SUITE 2D	STREET ADDRESS	15014 SW 130TH COURT
CITY-ST-ZIP	MIAMI FL 33166	CITY-ST-ZIP	MIAMI FL 33186
TITLE	D <input type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BECERRA, MARIO	NAME	BECERRA, MARIO
STREET ADDRESS	880 W. 39 PL.	STREET ADDRESS	880 W 39 PL
CITY-ST-ZIP	HIALEAH FL 33012	CITY-ST-ZIP	HIALEAH FL 33012
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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:

Rodolfo Munoz
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-29-2000

DATE

(305) 220-5458

Daytime Phone #

CR2E034 (9/99)