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Superior Aircraft Sorvices INC									
Principal Place of Business Mailing Address					ESCOLINGY OF STATE THE LATHERS FLORIDA				
FT LAWERDAGE 300 TERMIN					Elette man in se				
ARpor	27	FT LAUDERDALE FL 33315							
2. Principal Pla		3. Mailing Address			,				
FT LAUDERDALE Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State		City & State			4. FEI Number Applied For Not Applied For]
Zip Country		Zip Count		try			.75 Addi	tional	
-	6. Name and Address of Current Re	gistered Agent		7. Name and Address of New Reg				-	
TON		NA			-				
TONYA Smith 2360 NW 1545+				Street Address (P.O. Box Number is Not Acceptable)				
	ni FL 33054								
IVIIHH	7, 76 3300-1	·		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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
9. This corpora	ation is eligible to satisfy its Intangible	FILE NOW!	e in the state of	医皮肤原皮 化混合性的 医二二甲烷酚 過數	10. Election Campaign Finan	icing	\$5.00) May Be	
Tax filing red (See criteria	quirement and elects to do so. a on back)	After MAY 1, 20 Make Check Payab			Trust Fund Contribution.			to Fees	
11.	OFFICERS AND DI	RECTORS	12.	and the first to the state of t	ADDITIONS/CHANGES TO OFFIC				ြ
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CITY-ST-ZIP	Suurise Fl 33351			-ST-ZIP	20tion 110 07(3\(i)\) Elevide Charles 1-6	urther certife.	that the in	formation	1
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: DANNY DINE GO 100 954-359-4669 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER DEPORT OF SIGNING OFFICER OF SIGNING OF SIGNING OFFICER OF SIGNING OF SIGNING OFFICER OF SIGNING OF SIGNING OFFICER OF SIGNING OFFICER OF SIGNING OFFICER OF SIGNI									

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Superior Aircraft Service Inc.

300 Terminal Drive Fort Lauderdale, Florida 33315 (954) 359-6669



Dear Mr Scott,

This letter is to ask you to please waive the late-fee due to not receiving the 2000 AR. This letter is also to tell you of our address change. The new address is:

Superior Aircraft Services Inc. 300 Terminal Dr Ft Lauderdale FL 33315

Enclosed is a check for \$150.00 for the renewal fee. If you have any questions please call me at 954-359-6669.

Thank you for your attention to this matter.

Sincerely,

Jerome Smith

CEO Superior Aircraft Services

