PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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	RPORATI STATEM	2 2 2 COL 1410 (C)	, S	DEPARTMENT OF STATE ecretary of State		SECRETARY OF S DIVISION OF CORPO OL NOV -9 PM	
DOCUMENT # P990000 42092 1. Corporation Name AIRCRAFT FINANCE CORPORATION 1641 S PERIMETER ROAD							
1641 S PERIMETER ROAD							. 0 . 011
2. Principal Office Address 1641 S PERIMETER ROAD			3. Mailing Office Address 1641 S PERIMETER ROAD		REINSTATEMENT 00-04		
Suite, Apt. #, etc. HANGAR 34			Suite, Apt. #, etc. HANGAR 34		4. Date Incorporated or Qualified To Do Business in Florida MAY 10, 1999		
City & State FORT LAUDERDALE, FL			City & State FORT LAUDERDALE, FL		5. FEI Numbe		Applied For
Zip 33309		Country USA	Zip 33309	Country USA	6. CERTIFICATE	OF STATUS DESIRED S8.75 Ac	Iditional Fee required entiticate of Status
			7. Na	me and Address of Current Registe	ered Agent		
	Name CONRAD KULATZ, ESQ. Street Address (P.O. Box Number is Not Acceptable) 633 S.E. THIRD AVENUE Suite, Apt. #, Etc. SUITE 4R City State Zip Code						
	FORT LAUDERDALE					FL 33301	
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent Date NEGISTERED AGENT MUST SIGN							
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least							
Titles	Name of Officers and/or Directors			Street Address of Each Officer and/or Director		City / State / Zip	
P/S/D	DONALD E LEWANDOWSKI, JR.		ii, JR.	1641 S PERIMETER ROAD # 34		FORT LAUDERDALE, FL 33309	

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10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the empowered to execute this application as the reason for dissolution has been eliminated, the empowered to execute this application as the reason for dissolution has been eliminated, the empowered to execute the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation-have been paid and the names of individuals tisted in this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the empowered to execute the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation-have been paid and the names of individuals tisted in this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the empowered to execute the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation-have been paid and the names of individuals tisted in the section of the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation for an exemption under section 119.07(3)(i), F.S. The information indicated on this application are requirements of section 607.0401, F.S., that all fees owed by the corporation for a corporation for all fees over the corporation for a							

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