2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 01, 2002 8:00 am
Secretary of State
06-03-2002 91200 021 ***150.00

DOCUMENT # P99000056085

1. Entity Name
SOUTHEAST TURBINE AIRCRAFT SALES, INC.

4 0 0 4 0

[redacted]

Principal Place of Business	Mailing Address
39 SAINT THOMAS DRIVE PALM BEACH GARDENS FL 33418	39 SAINT THOMAS DRIVE PALM BEACH GARDENS FL 33418

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0928802 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATE CREATIONS ENTERPRISES, INC.
941 FOURTH STREET, #200
MIAMI BEACH FL 33139

7. Name and Address of New Registered Agent

Name David M Trombley
Street Address (P.O. Box Number is Not Acceptable) 39 ST Thomas DR
City Palm Beach Gardens FL Zip Code 33418

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [signature] DAvid M Trombley
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 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 $550.00
After September 13, 2002 Fee will be $750.00
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 NAME STREET ADDRESS CITY-ST-ZIP	D TROMBLEY, DAVID M 39 SAINT THOMAS DRIVE PALM BEACH GARDENS FL 33418	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (4/02)

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: SIGNATURE REQUIRED [signature] 7-10-02 5616254446
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

40346 [redacted] / Attachment P990005-6085

7-10-02

DEAR SIR

I did not Receive The Letter Dated June 6.

Please Note That Per A Phone Conversation With Maddley That She is holding my ~~FO~~ OLD FOR UNTILL She Receives This New FORM with the PROPER SIGNATURE. She has the check FOR The Fee AT PRESENT

THANKS
DAVID THOMBLEY