

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2002 8:00 am
Secretary of State

05-21-2002 91196 001 ***150.00

DOCUMENT # P99000091242

1. Entity Name
SUNCOAST AIRCRAFT SALES CORP.

Principal Place of Business
5650 NE 21ST DRIVE
FORT LAUDERDALE FL 33308

Mailing Address
5650 NE 21ST DRIVE
FORT LAUDERDALE FL 33308



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3850 2509 55th CT

3. Mailing Address
3850 OAKS Clubhouse Dr

Suite, Apt. #, etc.
FORT LAUDERDALE

Suite, Apt. #, etc.
UNIT 109

City & State
FL

City & State
POMPANO BEACH FL

4. FEI Number
65-0937698

Applied For
 Not Applicable

Zip
33309

Country
FLORIDA

Zip
33069

Country
FLORIDA

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

6. Name and Address of Current Registered Agent

BORNSTAD, GERALD JR
5650 NE 21ST DRIVE
FORT LAUDERDALE FL 33308

3850 OAKS Clubhouse Dr
UNIT 109
POMPANO BEACH FL
33069

7. Name and Address of New Registered Agent

Name
BORNSTAD, GERALD JR

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 **Gerald Bornstad**

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 \$150.00
After May 1, 2002 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 NAME STREET ADDRESS CITY-ST-ZIP	PSTD BORNSTAD, GERALD JR 5650 NE 21ST DRIVE FORT LAUDERDALE FL 33308 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD BORNSTAD, CLEO S 5650 NE 21ST DRIVE FORT LAUDERDALE FL 33308 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: **Gerald Bornstad** **REQUIRED**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/29/02

CR2E034 (9/01)