2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000107196

1. Entity Name

J&J AEROSPACE PARTS, INC.

Principal Place of Business	Mailing Address
18790 S.W. 248 STREET HOMESTEAD FL 33031	18790 S.W. 248 STREET HOMESTEAD FL 33031

2. Principal Place of Business — 30370 OLD DIXIE HIGHWAY

3. Mailing Address — AS ABOVE

Suite, Apt. #, etc. — #325

Suite, Apt. #, etc.

City & State — MIAMI FL

City & State

Zip — 33033   Country — USA

Zip

Country

4. FEI Number [X] Applied For [ ] Not Applicable

5. Certificate of Status Desired [X] $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BOWDEN, ~~JENNY~~ JENNIFER 18790 S.W. 248 STREET HOMESTEAD FL 33031	Name JENNIFER BOWDEN Street Address (P.O. Box Number is Not Acceptable) 30370 OLD DIXIE HIGHWAY PMB 325 City MIAMI FL Zip Code 33033

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]_   2/5/00

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, 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 NAME WILLIAM V BOWDEN [ ] Delete STREET ADDRESS 18790 SW 248th St (VP) CITY-ST-ZIP Miami Fl 33034		TITLE NAME STREET ADDRESS CITY-ST-ZIP	[ ] Change	[ ] Addition
TITLE NAME CHRISTOPHER BOWDEN [ ] Delete STREET ADDRESS 18790 SW 248th St (SEC) CITY-ST-ZIP Miami Fl 33031		TITLE NAME STREET ADDRESS CITY-ST-ZIP	[ ] Change	[ ] Addition
TITLE NAME JENNIFER S. BOWDEN [ ] Delete STREET ADDRESS 18790 SW 248th St (PRES) CITY-ST-ZIP Miami Fl 33031		TITLE NAME STREET ADDRESS CITY-ST-ZIP	[ ] Change	[ ] Addition
TITLE NAME [ ] Delete STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	[ ] Change	[ ] Addition
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TITLE NAME [ ] Delete STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	[ ] Change	[ ] Addition

CR2E034 (9/99)

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]_   JENNIFER S. BOWDEN   2/5/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #