## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S10226

(6)

HOUSE OF PARTS AIRCRAFT SUPPLY, INC.								
Principal Plac	e of Business	Mailing Address			-{	8411 <b>6</b> 1811 81841 811		II <b>010</b> 11 10 <b>1</b> 1
10544 NW 26 ST 10544 NW 26 ST STE E-103 STE E-103 MIAMI FL 33172 MIAMI FL 33172					DO NOT WRITE IN THIS SPACE			
US US					3. Date Incorporated or Qualified			
9 Ozincipal C	Place of Purinage	2a. Mailing Address			10/31/1990 4. FEI Number		114	alian Fa
L_ :							<del></del>	oplied For ot Applicable
26     Sulte, Apt. #, etc.   Suite, Apt. #, etc.				·	65-0251253		\$8.75	
27					5. Certificate of Status Desired	LJ '	Fee Re	
I City & State I City & State					6. Election Campaign Financing		\$5.00	May Re
28					Trust Fund Contribution		Added	•
Zip	p Country Zip				8. This corporation owes or has p	paid the currer	nt year Int	angible
24	25	29	30		Personal Property Tax due Jun			] No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New R	egistered Ag	ent	
	ONTI, RENATE		81 1	lame				
10544 NW 28 ST, STE E-103			82 S	treet Addre	ess (P.O. Box Number is Not Accepta	able)		
MIAMI FL 33172							· <del>-</del>	
]			83					
			<b>84</b> C	ity			85 Zip (	Code
6 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			an the observe of	omad sacot	aration automite this statement for the	FL	i	o societarnal
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered								registered registered
agent.la	m familiar with, and accept the obliga	ations of, Section 607.0505, Flo	orida Statutes.					
SIGNATURE	Stgnature, typed or printed name of registered age	et and tille if austral in (NOT)	E: Reg-stered Agent si	prosture require	d when spiretating	DATE		
12.	OFFICERS AND	<del></del>	13.	granie radulio	ADDITIONS/CHANGES TO OFF		IRECTOP	S IN 12
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NAME	-CONTIL RENATE- JUNCAL, Heidligh		1.2 NAME					
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CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP					
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STREET ADDRESS			6.3 STREET ADD	HESS				
CITY-S1-ZIP			6.4 CITY-ST-Z	Р				

Thereby 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachquent with an address.

SIGNATURE:

Veirle I

4-14-98

305-477-77/9

**FILED** 

Apr 22 1998 8:00am

Secretary of State