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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # S14688

(3)

ADVANCE AIRCRAFT ENGINES, INC.

FILED Apr 11 1997 8:00am Secretary of State



Principal Place of Business BUILDING 406 ANNEX OPA LOCKA AIRPORT		Mailing Address BUILDING 406 ANNEX OPA LOCKA AIRPORT			T TORKINDE LOT HER IN BUILDED BUILDS SOURCE BUILD TORK BUILDIN BUILDIN BUILDIN BUILDIN BUILDIN BUILDIN BUILDIN				
OPA LOCKA	FL 33054	OPA LOCKA FL 33054				3. Date Incorporated or Qualified	las De	te of Last F	Report
						11/13/1990		26/1996	тороп
2. Principal	Place of Business	28. Mailing Address	AT-MILLIAN		***************************************	4. FEI Number	1		pplied For
21		26				65-0223923		N	lot Applicable
Suite, Ap	ot. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required
City & St	ato	City & State				6. Election Campaign Financing) May Be
23		28				Trust Fund Contribution			to Fees
Zφ	Country	Zip	Cor	untry		8. This corporation has liability for Ir			s. 199.032,
24	25	29	30	,			Yes [
	g. Name and Address of Cur	······································		81	Nome	10. Name and Address of New Reg	pistered /	igent	
	MALL BUSINESS CONSULTING	ACCOUNTING AND T		"	Name				
	(ES, INC.			82	Street Addr	ress (P.O. Box Number is Not Acceptable	le)		
	08 West Atlantic BLVD. Argate FL 33063			83			··········-		
				84	City			85 Zip	Code
				Ш		poration submits this statement for the pution's board of directors. I hereby accept	FL		
SIGNATURE	Styruture, typed or printed name of registered	agent and title if applicable. (A AND DIRECTORS	NOTE: Registere	d Age	ni signature requi	red when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE ERS AND	DIRECTO	RS IN 12
TITLE	DPT	DELETE	1.1 TI	ITLE			***************************************	Change	Additio
NAME	TURNER, ERIC L.		1.2 N	IAME					
STREET ADORESS			1.3 5	TREET	ADDRESS				
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NAMÉ	TURNER, LINNETTE M.		2.2 N						
STREET ADDRESS			210	TREFT	ADDRESS				
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1. I do 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 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 their importation or the proceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block if crypt at or on an attachment with an address.

SIGNATURI

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Date

Daytime Prone #