

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Matham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **S84738** (1)

1. Corporation Name

~~INTERSTAR TRADING CORPORATION~~  
**AVTEAM, Inc.**

NC  
3-26-96  
ABP

Principal Place of Business: **8271 NW 64TH ST MIAMI FL 33166 US**

Mailing Address: **3230 EXECUTIVE WAY PO BOX 522460 MIAMI FL 33152-2460 US**



**800001862448**  
-06/14/96--01043--042

2. Principal Place of Business (21-24)  
2a. Mailing Address (26-29)

3. Date of Last Report Qualified: **10/03/1991**

3a. Date of Last Report: **03/14/1995**

4. FEI Number: **65-0313187**

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

6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent

**SRAGOWICZ, LEON**  
**5181 PINETREE DR.**  
**MIAMI BEACH FL 33140**

10. Name and Address of New Registered Agent

81 Name: **GRAW, DONALD A.**

82 Street Address (P.O. Box Number is Not Acceptable): **6211 NW 98th Drive**

83 City: **Parkland** FL 85 Zip Code: **33076**

11. Pursuant to the provisions of Sections 607.0507 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 agent. I am familiar with, and accept the obligations of, Section 607.0906, Florida Statutes.

SIGNATURE: *[Signature]* 5/31/96

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
DC	SRAGOWICZ, LEON	5181 PINETREE DR.	MIAMI BEACH FL	<input type="checkbox"/>
DST	PRESTON, RICHARD	666 71ST STREET	MIAMI BEACH FL	<input type="checkbox"/>
DP	GRAW, DONALD A.	6211 NW 98TH DR	PARKLAND FL 33076	<input type="checkbox"/>
DV	LEVY, JAIME	20330 NW THIRD ST	PEMBROKE PINES FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	Change	Addition
	SRAGOWICZ, LEON	166 BAL BAY DR.	BAL HARBOR, FL 33154	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	DS	PRESTON, RICHARD	1930 N.E. 118 Rd.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	DP	GRAW, DONALD A.	6211 N.W. 98th Dr.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	DV	LEVY, JAIME	18111 NW 16 ST	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	T	Koondal, Mark	12435 NW 19th Place	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	V	McFarland, B. Thomas	19461 N.W. 10St.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 registrar 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 in an attachment with an address.

SIGNATURE: *[Signature]* 5/31/96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)

6-12-96 ABP