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

PROFIT
CORPORATION
ANNUAL REPORT

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CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S93675

(4)

MATSUI AVIATION CORPORATION

FILED Jan 15 1998 8:00am Secretary of State

Principal Place of Business	Mailing Address		L INDIANALA ING MAINNA USINA MAINN NAMBAL ALIAN NAMBAL ALIAN MENAL MENAL MENAL MENAL MENAL MENAL MENAL MENAL M
201 E KENNEDY BLVD STE 1950 TAMPA FL 33602-5829 US	201 E KENNEDY BLVD STE 1950 TAMPA FL 33602-5829 US		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  11/13/1991
2. Principal Place of Business	2a, Mailing Address		4. FEI Number Applied for
21	26		59-3107698 Not Applicable
Sulte, Apt. #, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
<b>Zip</b> Country <b>25</b>	29 30	untry	8. This corporation owes or has paid the current year Intangible Personal Property 1ax due June 30.  Yes X No
			10. Name and Address of New Registered Agent
FREEMAN, GROVER C. 201 E KENNEDY BLVD. SUITE 1950 TAMPA FL 33602		81 Name 82 Stree	t Address (P.O. Box Number is Not Acceptable)
		83	
_		84 City	FL 85 Zip Code
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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE Signature, typed or printed name of registered agent and title complectable. (NOT) Registered Agent signature required when recrisiting. DATE			

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. DELLTE 1.1.1ITE Addit-on NAME FREEMAN, GROVER C. 1.2 NAME FREEMON GROVER C STREET ADDRESS 201 E KENNEDY BLVD STE 1950 1.3 STREET ADDRESS 2018 Kennedy BLUN STE 1950 TAMPA FL CITY-ST-ZIP 1.4 CHY - ST - ZIP OLLETE TITLE Change Addition 217008 NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2 4 CITY- ST- 7IP DELETE TITLE ☐ Change Addition 31 THLE NAME 3.2 NAME **STREET ADDRESS** 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE TITLE 4.1 111LE Change Addition

4. 2 NAME

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4.3 STREET ADDRESS

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5.4 CITY - ST- 7IP

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14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. Further certify that the information indicated on this annual report or supplemental annual report is two 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 expressed 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 attachment with any address.

1 1666 017-227-5-21-

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Addition

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