SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V21679

(8)

ALL AIRCRAFT, INC.

Principal Place of Business

Mailing Address

4611 SOUTHWEST 30TH WAY FORT LAUDERDALE FL 33312

4611 SOUTHWEST 30TH WAY FORT LAUDERDALE FL 33312

FILED

97 NOV -6 PM 2: 56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

				3. Date Incorporated or Qualified 3a. Date of Last Report			
					03/17/1992	02/19/19	996
	lace of Business	2a. Mailing Address			4. FLI Number	-, -, [Applied For
21 45		& 26			65-0392185		Not Applicable
Suite Apt. 22 #16		Suite, Apt. #, etc.			5. Certificate of Status Desired		. 75 Additional ee Required
City & State		City & State			6. Election Campaign Financing		.00 May Be
23 5 0/	UKISE, FL	28			Trust Fund Contribution	Ad	ided to Fees
Zip 3 3	351 25 USA	Zip 30	Country		8. This corporation owes or has pa Personal Property Tax due June		ar Intangible
	9, Name and Address of Curren	Registered Agent			10. Name and Address of New Re	gistered Agent	
FAL	LS, MICEAEL		81	Name			
4044 OU DOTH WAY				82 Street Address (P.O. Box Number is Not Acceptable)			
FT. LAUDERDALE FL 33312				or other results (1.57 pp. results in the property of the prop			
			83				
							- 1.
			84	City		FL 85	Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above	e-named co	orporation submits this statement for the pration's board of directors. I hereby accept		ing its registered
office or r	egistered agent, or both, in the State	of Horida, Such change was auth	norized by	the corpo	ration's board of directors. I hereby accep	ot the appointmen	nt as registered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes							
SIGNATURE	Signature, typed or printed place of registered age-	of and talle if applicable (NOTE Re	egistered Age	nt signature rec	guired when minstaling)	6/31/97	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	JORS IN 12
TITLE	PS	DELETE	1.1 DILE	·····	PS	Cha	ange Addition
NAME	FALLS, MICHAEL B.		1.2 NAME	1	FALLS MICHAEL B.		
STREET ADDRESS	4611 SW 30TH WAY		1.3 STREET	ADDRESS	FALLS, MICHAEL B. 4501 N. W. 103RS NE SUPPLISE, FL 333	103	
CITY-ST-ZIP	FORT LAUDERDALE FL		1.4 CITY - S	1- Z(P	SINEY FL 333	57	
TITLE		DELETE	2.1 11111		Jon Hotel (12 12 12 12 12 12 12 12 12 12 12 12 12 1	☐ Cha	ange Addition
JAME	II		22 NAME	ł			1
STREET ADDRESS		•	23 STREET	ADDRESS			
CITY-ST-ZIP			2 4 CHY-S	· 1			
TITLE		DELETE	3.1 TITLE		240 16 16 16 15 15	and Che	ange Addition
NAME !			3.2 NAME		93CTCTCT275 -11/127 ****16	น /ก เกนา	021
STREET ADDRESS		3 **		ADDRESS	mann to	C LIU WARA	ese f CCC (187)
CITY-ST-ZIP			3.4. CITY - S		₩₩₩₩ 2 ().	3.UU ***	**100 UU
TITLE		DELETE	4.1 1ITLE			Cha	ange Addition
NAME			4.2 NAME	- 1			` -
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST				i
TITLE		DELETE	5.1 THE			Cha	ange Addition
NAME			5.2 NAME				. —
STREET ADDRESS			5.3 STRFET	Annerce			
CITY-ST-ZIP			54 CITY-ST				
TITLE		T DELETE	6.1 TITLE	1 - £ 1f		Cha	ange Addition
NAME		hand or black the	6.2 NAME			المال في	7 7
STREET ADDRESS			6.3 STREET	ADDUI CC		,	(.)//
						R	7 0 %/
14. I do heret	ov certify that the information supplied	with this filing does not qualify for	6.4 CHY-SI or the exer		ed in Section 119.07(3)(i) Florida Stalute	s. I further certify	that the
14. I do hereby certify that the information supplied with this filling 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 attachment with an address							

CICALATUDE MALANA

Call Biggs

,

10/2.190 747-8866

ALL AIRCRAFT CORPORATION 4501 n.w. 103rd ave SUNRISE, FL 33351



10/31/97

DEPT. OF STATE
DIVISION OF CORPORATIONS
ANNUAL REPORTS SECTION
P.O. BOX 1500
TALLAHASSEE, FL 32302-1500

please find enclosed the annual corporate report for the above company. as you can see by the enclosed report our address has been changed. we have not recieved this untill 2 days ago. we have enclosed the filing fee and pray that you will abate the late fee as our mail has not been regular or complete.

thanks in advance.

all alteraft inc. m. falls pres.