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

PROFIT CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # BENSON & KOBE AVIATION, INC. (5)

FILED May 04 1998 8:00am Secretary of State

Mailing Address Mailing Ad	55.10							
COOPER CITY FL 2008 COOPER CITY FL 2008 S. Dots Incorporated Or Cuastrice S. Dots Incorporated	Principal Place	e of Business	Mailing Address			C CERTIC STREET CHIEF CLIEB THE STREET CO.	TANDI MININ MINIT NENSI MENII CANI	
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Suite Apt #, etc Page Suite Apt #, etc Page Suite Apt #, etc Page	2. Principal P	lace of Business	2a. Mailing Address				Applied For	
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25		Country		Country	· · · · · · · · · · · · · · · · · · ·			
Name and Address of Current Registered Agent		25		<u>⊢,</u> ′		1	 -	
2220 BRIM WAY COOPER CITY FL 33026 282 Stratel Address (F.O. Box Number is Not Acceptable) 283 284 City FL 285 Typ Code 11. Pursuant to the provisions of Soctions 607.0502 and 607.1508. Florida Statulos, the above-named corporation submits this statement for the purpose of changing its registered agent. an immediate with, an immediate with, and eccept the citylepions of, Section 607.0505. The purpose of provisions of directors in the Statu of Ford La. Such change was authorized by the corporation's board of directors. I horoby accept the appointment as registered agent. I am immediate with, and eccept the citylepions of, Section 607.0505. The purpose of provision's board of directors. I horoby accept the appointment as registered agent. I am immediate byte of present research of the purpose of control of the purpose		9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Registers	d Agent	
COOPER CITY FL 33026 ### City #FL 85 Zip Code 11. Pireuant to the provisions of Scellains 607 05.07 and 607 15.08. Fluids Statutes, the above named corporation submitts this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of Scellains Statutes. SIGNATURE				81	Name			
STREET ADDRESS CITY-ST-2P				82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
### City #PL 88 Zip Code 11. Pursuant to the provisions of Socions 607 0502 and 607 1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its 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, 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 spent. I mile flamful with an accept the obligations of Science 607 0506, florida Statules. Signature lipid or present facine of top-hereal lipid at any time? Applicable. MOII Registeried Agent separate inquired when reliebling DAT	CC	OPER CITY FL 33026						
11. Pursuant to the provisions of Sections 607 (05/02 and 607 1508; Florida Statules, the above-named corporation submits this statement for the purpose of changing its 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, 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, 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 directors. I hereby accept the appointment as registered agent directors. I hereby accept the appointment as registered agent directors. I hereby accept the appointment as registered agent directors. I hereby accept the appointment as registered agent directors. I hereby accept the appointment as registered agent, or both specified agent. I hereby accept the appointment as registered agent directors. I hereby accept the otherwise a registered agent directors. I hereby accept the otherwise as registered agent. I hereby accept the otherwise as registered agent directors. I hereby accept the otherwise as registered agent directors. I hereby accept the otherwise as registered agent directors. I hereby accept the otherwise as registered agent directors. I hereby accept the otherwise as registered agent directors. I hereby accept the otherwise as registered agent directors. I hereby accept the otherwise as registered agent directors. I hereby accept the otherwise as registered agent directors. I hereby accept the otherwise as registered agent directors. I hereby accept the otherwise as registered agent directors. I hereby accept the otherwise as registered agent directors. I hereby accept the otherwise as registered agent directors. I hereby accept the otherwise as registered agent directors. I hereby accept the otherwise as registered agent directors. I hereby accept the otherwis				83				
11. Pursuant to the provisions of Sections 607 (500 and 607 1508 floridal Statules, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the Statu of First Sub of First Submits Subch change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the submits				84	City		85 Zip Code	
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 and familiar with cobligations of, Section 607 6605, Florida Statutes. SIGNATURE	11 Purcuant	to the provisions of Sections 607.0	502 and 607 1508 Florida Statuta	an the above	a-named core			
SIGNATURE	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							
12.								
TITLE	SIGNATURE	Signature, typod or printed name of registered a	agent and title d'applicable (NOTE	Registered Ag	ent signature requir	rod when reinstating) DATE		
NAME BENSON, EDWARD 12 NAME 13 STREET ADDRESS CITY-ST-ZIP COOPER CITY FL	12.			13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12	
STREET ADDRESS CITY-ST-ZIP	TITLE	_	☐ DELETE 1.1 T				Change Addition	
COOPER CITY FL	NAME			1.2 NAME	İ			
TITLE		COORED CITY CI						
NAME KOBE, THOMAS 22 NAME 22 NAME 23 STREET ADDRESS 2620 BRIM WAY 23 STREET ADDRESS CITY-S1-ZP COOPER CITY FL			DELETE		ST-ZIP		Change Addition	
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STREET ADDRESS 6.3 STREET ADDRESS	ì		_ Steens					
	1				ADDRESS		ļ	

14. I 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 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 attractment with an address