

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

FILED  
Mar 26 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **V40843**

1. Corporation Name

**EUROPEAN AIRCRAFT CORPORATION**

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>6-3-92</b>	
21	<b>2292 S.W. 180TH AVE</b>	26	<b>2292 S.W. 180TH AVE</b>	4. FEI Number <b>59-3130340</b>	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
City & State <b>MIRAMAR, FL.</b>		City & State <b>MIRAMAR, FL.</b>		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
23		28			
24	<b>33029</b>	25	<b>USA</b>	29	<b>33029</b>
Zip		Country		30	<b>USA</b>

9. Name and Address of Current Registered Agent

**MICHEL SCHNEIDER  
331 FALLING LEAF WAY  
CASSELBERRY, FL. 32707**

10. Name and Address of New Registered Agent

81 Name **DON MERCER**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**2292 S.W. 180TH AVE**  
83  
84 City **MIRAMAR** FL 85 Zip Code **33029**

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 **DON MERCER** **DON MERCER**  
Signature typed or printed name of registered agent (and title if applicable) (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>PRESIDENT &amp; DIR.</b> <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<b>PRESIDENT &amp; DIRECTOR</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HANS SCHNEIDER</b>	1.2 NAME	<b>Don Mercer</b>
STREET ADDRESS	<b>1438 Highwood DR.</b>	1.3 STREET ADDRESS	<b>2292 S.W. 180TH AVE.</b>
CITY - ST - ZIP	<b>MIRAMAR, FL. 33029</b>	1.4 CITY - ST - ZIP	<b>MIRAMAR, FL. 33029</b>
TITLE	<b>Vice President &amp; Dir.</b> <input type="checkbox"/> DELETE	2.1 TITLE	
NAME	<b>Don Mercer</b>	2.2 NAME	
STREET ADDRESS	<b>2292 S.W. 180TH AVE.</b>	2.3 STREET ADDRESS	
CITY - ST - ZIP	<b>MIRAMAR, FL. 33029</b>	2.4 CITY - ST - ZIP	
TITLE	<b>SEC - TREAS &amp; DIR</b> <input checked="" type="checkbox"/> DELETE	3.1 TITLE	
NAME	<b>Michel Schneider</b>	3.2 NAME	
STREET ADDRESS	<b>331 Falling Leaf Way</b>	3.3 STREET ADDRESS	
CITY - ST - ZIP	<b>Casselberry, FL. 32707</b>	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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 attachment with an address.

SIGNATURE: **DON MERCER** **DON MERCER** **3/22/98 954 437-6770**

CR2E034 (10/97)