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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

141 NE 3RD AVE

10TH FLOOR



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V65143

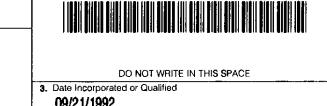
(2)

Mailing Address

141 NE 3RD AVE 10TH FLOOR

WATKINS & VICKERS AEROSPACE SALES, INC.

FILED
May 15 1998 8:00am
Secretary of State



MIAMI PL 331	अर	MIAMI PL 33131			
US		us		3. Date Incorporated or Qualified	
				09/21/1992	
2. Principal Pl	lace of Business	2a. Mailing Address	am 1	4. FEI Number	Applied For
21 205	7 SW 3rg are.		3rd Overvue	65-0433672	Not Applicable
Suite, Apt.	#, etc.	Suite. Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	θ	City & State		6. Election Campaign Financing	\$5.00 May Be
23 MiA/	ni. Fla.	28 MIAMI, FL	ORIDA	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the co	
24 33)2	29 25 USA	29 33)29 3	Country USA	Personal Property Tax due June 30.	Yes X No
	9. Name and Address of Current		<u>- </u>	10. Name and Address of New Registered	I Agent
LIBERATORE, MICHAEL J 81 Name					
1 BRICKELL SQUARE					
801 BRICKELL AVE MIAMI FL 33131			82 Street Address (P.O. Box Number is Not Acceptable)		
			63		
			84 City	FI	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. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, typed or product name of regulation are of regulation and the diapplicable (NOTE: Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND		T 13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	NILESEN, WILLEN		1.2 NAME		
STREET ADDRESS	801 BRICKELL AVE #929		1.3 STREET ADDRESS		
	MIAMI FL				
CITY-ST-ZIP	n miximi rc	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
TITLE		L.J OLLCIL			C onlarge C Addition
NAME	WILLIG, DAVID S		2.2 NAME		
STREET ADDRESS	801 BRICKELL AVE #929		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS	•	
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELFTE	6.1 TITLE		☐ Change ☐ Addition
NAME		<u>—</u>	6.2 NAME		i
			6.3 STREET ADDRESS		
STREET ADDRESS			6.3 STREET AUUNESS		

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. 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 attachmy with an address.