

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000055272

Entity Name: CSI AEROSPACE, INC.**Current Principal Place of Business:**2020 W. DETROIT STREET
BROKEN ARROW, OK 74012**Current Mailing Address:**3000 TAFT STREET
HOLLYWOOD, FL 33021 US**FEI Number:** 45-5531151**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PALLOT, JOSEPH W
825 BRICKELL BAY DRIVE
SUITE 1644
MIAMI, FL 33131 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	SECRETARY
Name	LETENDRE, ELIZABETH R.
Address	3000 TAFT STREET
City-State-Zip:	HOLLYWOOD FL 33021

Title	TREASURER
Name	MACAU, CARLOS L. JR.
Address	3000 TAFT STREET
City-State-Zip:	HOLLYWOOD FL 33021

Title	DIRECTOR
Name	MENDELSON, ERIC A.
Address	825 BRICKELL BAY DRIVE SUITE 1644
City-State-Zip:	MIAMI FL 33131

Title	ASST. SECRETARY
Name	MACHADO, VIVIAN
Address	825 BRICKELL BAY DRIVE SUITE 1644
City-State-Zip:	MIAMI FL 33131

Title	DIRECTOR, VICE PRESIDENT & GENERAL MANAGER
Name	FEELEY, ANDREW J.
Address	2020 W. DETROIT STREET
City-State-Zip:	BROKEN ARROW OK 74012

Title	ASST. SECRETARY
Name	MARTINEZ, JULISSA P.
Address	3000 TAFT STREET
City-State-Zip:	HOLLYWOOD FL 33021

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CARLOS L. MACAU, JR.**TREASURER****04/03/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date