

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2005 08:00 AM
Secretary of State

DOCUMENT # F98000002999
 1. Entity Name
 EMBRAER SERVICES, INC.



Principal Place of Business Mailing Address
 C/O CESAR F. CARRARI C/O CESAR F. CARRARI
 276 S.W. 34TH STREET 276 S.W. 34TH STREET
 FORT LAUDERDALE, FL 33315 FORT LAUDERDALE, FL 33315



01112005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
 52-2051994 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 AMERICAN INFORMATION SERVICES, INC.
 ONE SOUTHEAST THIRD AVENUE
 28TH FLOOR
 MIAMI, FL 33131

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE	D
NAME	SPULAK, GARY J
STREET ADDRESS	276 SW 34TH STREET
CITY-ST-ZIP	FORT LAUDERDALE, FL 33315
TITLE	D
NAME	YOKOTA, SATOSHI
STREET ADDRESS	276 S.W. 34TH STREET
CITY-ST-ZIP	FORT LAUDERDALE, FL 33315
TITLE	MDCO
NAME	DE BAERE, FERNANDO L.A.
STREET ADDRESS	276 S.W. 34TH STREET
CITY-ST-ZIP	FORT LAUDERDALE, FL 33315
TITLE	V
NAME	SPULAK, GARY J
STREET ADDRESS	276 S.W. 34TH STREET
CITY-ST-ZIP	FORT LAUDERDALE, FL 33315
TITLE	S
NAME	CARRARI, CESAR F
STREET ADDRESS	276 S.W. 34TH STREET
CITY-ST-ZIP	FORT LAUDERDALE, FL 33315
TITLE	D
NAME	PIZARRO MANSO, ANTONIO LUIZ
STREET ADDRESS	276 SW 34TH ST
CITY-ST-ZIP	FORT LAUDERDALE, FL 33315

DO NOT WRITE IN THIS SPACE

000000191344
 01/24/05-80169-016 158.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Cesar F. Carrari Date: JANUARY 07, 2005 Daytime Phone #: 954-359-3421