


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 07, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000002784
1. Entity Name
AIRCRAFT INTERNATIONAL DELIVERY, INC.



Principal Place of Business Mailing Address
7340 SW 132ND ST. 7340 SW 132ND ST.
MIAMI, FL 33156-6804 MIAMI, FL 33156-6804

DO NOT WRITE IN THIS SPACE



01122005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
30-0015379 Not Applicable

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

6. Name and Address of Current Registered Agent

ARCHER, STUART H
7340 SW 132ND ST.
MIAMI, FL 33156-6804

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

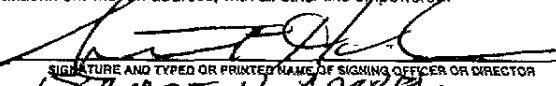
9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD ARNOLD, WILLIAM S 861 QUEENS HARBOR BLVD. JACKSONVILLE, FL 322256804
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD HEAD, DAN E 986 CHESTNUT HILL RD. MARIETTA, GA 30064
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD LARKIN, PETER C 1228 HILLSBORO MILE, #106 HILLSBORO BCH, FL 33062
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD ARCHER, STUART H 7340 SW 132ND ST. MIAMI, FL 331566804
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

000000291318
14/07/05-80027-003 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 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:  5 APR 6 2005 805-238-0911
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #