



# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 29, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P02000062998 1. Entity Name VICTORY AIR TRANSPORT, INC.	
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Principal Place of Business 390 SW 34TH STREET FORT LAUDERDALE, FL 33315	Mailing Address 350 SW 34TH STREET FORT LAUDERDALE, FL 33315
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**DO NOT WRITE IN THIS SPACE**



01042005 No Chg-P CR2E034 (10/03)

4. FEI Number 04-3686516	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

LINNEMEIER, DAVID D  
350 SW 34TH STREET  
FORT LAUDERDALE, FL 33315

**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 \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LINNEMEIER, DAVID D 350 SW 34TH STREET FORT LAUDERDALE, FL 33315
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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:  David D. Linnemeier 954 359 0444

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #