

**FILED**  
**Mar 23, 2005 08:00 AM**  
**Secretary of State**

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                |                                                                                                                           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|
| <b>DOCUMENT # P97000028413</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                |                                          |
| 1. Entity Name<br><b>ABLE'S FLYING, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                |                                                                                                                           |
| Principal Place of Business<br><b>18390 SW 156TH STREET<br/>#16<br/>MIAMI, FL 33187</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                | Mailing Address<br><b>18390 SW 156TH STREET<br/>#16<br/>MIAMI, FL 33187</b>                                               |
| <b>DO NOT WRITE IN THIS SPACE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                |                                                                                                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                | <br>03092005 No Chg-P CR2E004 (10/05)   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                | 4. FEI Number<br><b>03-0740029</b>                                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                | Applied For<br><input type="checkbox"/> New Application                                                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                | 3. CERTIFICATE OF JURIS DICTIO <input type="checkbox"/> <b>\$A 75 additional Fee Required</b>                             |
| 6. Name and Address of Current Registered Agent<br><b>HERA, ABEL A<br/>18390 SW 156TH STREET<br/>#16<br/>MIAMI, FL 33187</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                | <b>DO NOT WRITE<br/>IN THIS SPACE</b>                                                                                     |
| 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 _____<br><small>Signature, typed or printed name of registered agent and sign if applicable (NOTE: Registered Agent signature must be in black ink)</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                |                                                                                                                           |
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2005 Fee will be \$550.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                | 9. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be<br/>Added to Fees</b> |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                | <b>DO NOT WRITE<br/>IN THIS SPACE</b>                                                                                     |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>D<br/>HERA, ABEL A<br/>18390 SW 156TH ST, STE 16<br/>MIAMI, FL 33187</b>    |                                                                                                                           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>PVST<br/>HERA, ABEL A<br/>18390 SW 156TH ST, STE 16<br/>MIAMI, FL 33187</b> |                                                                                                                           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                |                                                                                                                           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                |                                                                                                                           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                |                                                                                                                           |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(X), 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. (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: <i>[Signature]</i><br>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                | <b>3.17.05</b><br>DATE                                                                                                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                | <b>3052543427</b><br>Entity Phone #                                                                                       |