

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# V05146

Entity Name: HAWK AVIATION SERVICES, INC.

FILED
Nov 17, 2005
Secretary of State

Current Principal Place of Business:

1341 PINE AVENUE
ORLANDO, FL 32824 US

New Principal Place of Business:

Current Mailing Address:

1341 PINE AVENUE
ORLANDO, FL 32824 US

New Mailing Address:

FEI Number: 59-3102359

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, MARK
3140 FRIARS COVE RD
SAINT CLOUD, FL 34772 US

Name and Address of New Registered Agent:

SMITH, MARK
1341 PINE AVENUE
ORLANDO, FL 32824 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:

11/17/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SMITH, MARK
Address: 3140 FRIARS COVE RD
City-St-Zip: SAINT CLOUD, FL 34772

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/T (X) Change () Addition
Name: SMITH, MARK
Address: 1341 PINE AVENUE
City-St-Zip: ORLANDO, FL 32824

Title: S () Change (X) Addition
Name: SWEAT, PAULA
Address: 8532 LYONIA DRIVE
City-St-Zip: ORLANDO, FL 32829

Title: VP-M () Change (X) Addition
Name: GETTY, ROBERT
Address: 1103 MARYLAND AVENUE
City-St-Zip: ST CLOUD, FL 34769

Title: VP-Q () Change (X) Addition
Name: SULLIVAN, TIMOTHY
Address: 400 DIANE COURT
City-St-Zip: CASSELBERRY, FL 32707

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: MARK SMITH

P

11/17/2005

Electronic Signature of Signing Officer or Director

Date