

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jan 28, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # 155031**  
 1. Entity Name  
**FLORIDA AIRMOTIVE, INC.**



Principal Place of Business      Mailing Address  
**2633 LANTANA ROAD**      **2633 LANTANA ROAD**  
**SUITE 13**      **SUITE 13**  
**LANTANA FL 33462**      **LANTANA FL 33462**

2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country



1st MOORE      CR2E034 (10/04)

6. Name and Address of Current Registered Agent

**GASSAWAY, OWEN**  
**2633 LANTANA RD SUITE 13**  
**LANTANA FL 33460**

4. FEI Number      Applied For  
**59-0673717**      Not Applicable

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

7. Name and Address of New Registered Agent

Name \_\_\_\_\_  
 Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_  
 City \_\_\_\_\_ **FL** Zip Code \_\_\_\_\_

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**  
**Make Check Payable to Florida Department of State**

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

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	GASSAWAY, OWEN	
STREET ADDRESS	2633 LANTANA ROAD	
CITY- ST- ZIP	LANTANA FL	
TITLE	V	<input type="checkbox"/> Delete
NAME	GASSAWAY, OWEN H III	
STREET ADDRESS	2633 LANTANA ROAD	
CITY- ST- ZIP	LANTANA FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	GASSAWAY, ALICE	
STREET ADDRESS	2633 LANTANA ROAD	
CITY- ST- ZIP	LANTANA FL	
TITLE	T	<input type="checkbox"/> Delete
NAME	GASSAWAY, ALICE	
STREET ADDRESS	2633 LANTANA ROAD	
CITY- ST- ZIP	LANTANA FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	HOPKINS, RANDOLPH A	
STREET ADDRESS	2633 LANTANA ROAD	
CITY- ST- ZIP	LANTANA FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

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: Owen H. Gassaway      Date: 1/24/05      Telephone # 561-965-1414