

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 209263

FILED  
Apr 10, 2012  
Secretary of State

**Entity Name:** DELTA AIRCRAFT CORPORATION

**Current Principal Place of Business:**

1414 W SWANN AVE  
STE 100  
TAMPA, FL 33606 US

**New Principal Place of Business:**

**Current Mailing Address:**

1414 W SWANN AVE  
STE 100  
TAMPA, FL 33606 US

**New Mailing Address:**

**FEI Number:** 59-1288530      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KRUSEN, WILLIAM A SR  
1414 W SWANN AVE  
STE 100  
TAMPA, FL 33606 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: KRUSEN, W. ANDREW JR  
Address: 1414 W SWANN AVE, STE 100  
City-St-Zip: TAMPA, FL 33606

Title: D  
Name: KRUSEN, CHARLES B  
Address: 781 5TH AVE, APT 614  
City-St-Zip: NEW YORK, NY 10022

Title: TS  
Name: JONES, DOUGLAS N  
Address: 1414 W SWANN AVE, STE 100  
City-St-Zip: TAMPA, FL 33606

Title: D  
Name: MEYJES, PAMELA  
Address: 350 E 57TH STREET, APT 15B  
City-St-Zip: NEW YORK, NY 10022

I hereby 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 all other like empowered.

SIGNATURE: DOUGLAS N JONES

TS

04/10/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date