

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 287095

FILED  
Apr 24, 2006  
Secretary of State

Entity Name: NATIONAL AVIATION MANAGEMENT CORPORATION

**Current Principal Place of Business:**

3495 SW 9TH AVE  
FT LAUDERDALE, FL 33315 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 22460  
FT LAUDERDALE, FL 333352460 US

**New Mailing Address:**

FEI Number: 59-1108834      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

BOY, THOMAS E  
3495 S.W. 9TH AVENUE  
FORT LAUDERDALE, FL 33315 US

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

ROBBIN, SAMUEL A P  
3495 S.W. 9TH AVENUE  
FORT LAUDERDALE, FL 33315 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: SAMUEL A. ROBBIN

04/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: BOY, THOMAS E,  
Address: 3495 S.W. 9TH AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: DV ( ) Delete  
Name: BOY, T RUSSELL,  
Address: 3495 S.W. 9TH AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: T ( ) Delete  
Name: ROBBIN, WENDY B  
Address: 3495 SW 9TH AVE  
City-St-Zip: FT LAUDERDALE, FL 33315

Title: VPS ( ) Delete  
Name: ROBBIN, SAMUEL  
Address: 3495 SW 9TH AVE  
City-St-Zip: FT LAUDERDALE, FL 33315

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: BOY, THOMAS E,  
Address: 3495 S.W. 9TH AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PS (X) Change ( ) Addition  
Name: ROBBIN, SAMUEL  
Address: 3495 SW 9TH AVE  
City-St-Zip: FT LAUDERDALE, FL 33315

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: SAMUEL A. ROBBIN

PS

04/24/2006

Electronic Signature of Signing Officer or Director

Date