


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 02, 2006 08:00 AM**  
**Secretary of State**

|   |   |
|---|---|
| DOCUMENT # 313784<br>1. Entity Name<br>R S AVIATION INC |  |
|---|---|

|   |   |
|---|---|
| Principal Place of Business<br>7901 WEST 25TH COURT<br>HIALEAH, FL 33016-2727 | Mailing Address<br>7901 WEST 25TH COURT<br>HIALEAH, FL 33016-2727 |
|---|---|

**DO NOT WRITE IN THIS SPACE**



04272008 No Chg-P CR2E034 (11/05)

|                             |                               |
|-----------------------------|-------------------------------|
| 4. FEI Number<br>69-1159916 | Applied For<br>Not Applicable |
|-----------------------------|-------------------------------|

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|---|--------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
|---|--------------------------------|

|  |                                   |
|--|-----------------------------------|
| 6. Name and Address of Current Registered Agent<br><br>SCHULTZ, RAYMOND R.<br>3100 SW 117TH AVE<br>DAVIE, FL 33330 | <b>DO NOT WRITE IN THIS SPACE</b> |
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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when retaking)

|   |  |                             |
|---|--|-----------------------------|
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2006 Fee will be \$550.00</b> | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | \$5.00 May Be Added to Fees |
|---|--|-----------------------------|

|  |  |
|--|--|
| 10. OFFICERS AND DIRECTORS                       |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP | PSD<br>SCHULTZ, RAYMOND R<br>3100 SW 117TH AVE<br>DAVIE, FL      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP | V<br>BATTISTA, FRANK J.<br>7705 SW 74TH LANE<br>MIAMI, FL        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP | V<br>SCHULTZ, RICHARD A<br>19810 NW 7TH ST<br>PEMBROKE PINES, FL |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP |  |

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05/17/06-80119-013 150.00

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Raymond R. Schultz 25 Apr-06 305-825-4667  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Drydow Phone #