


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**


**FILED**  
**Jan 25, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # 313784**  
 1. Entity Name  
**R S AVIATION INC**



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

**DO NOT WRITE IN THIS SPACE**



01192007    No Chg-P    CR2E034 (11/05)

4. FEI Number <b>59-1159916</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

SCHULTZ, RAYMOND R.  
 3100 SW 117TH AVE  
 DAVIE, FL 33330

**DO NOT WRITE IN THIS SPACE**

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 date if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

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

000000603982  
 01/29/07-80035-010 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	PSD SCHULTZ, RAYMOND R. 3100 SW 117TH AVE DAVIE, FL
TITLE NAME STREET ADDRESS CITY- ST- ZIP	V BATTISTA, FRANK J. 7706 SW 74TH LANE MIAMI, FL
TITLE NAME STREET ADDRESS CITY- ST- ZIP	V SCHULTZ, RICHARD A 19810 NW 7TH ST PEMBROKE PINES, FL
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	

**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*      22 JAN. 07      305-825-4669  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #