## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 483079**

Address:

City-St-Zip:

FILED Apr 20, 2005 Secretary of State

Entity Name: ALL AIRCRAFT SPARES, INC.							
Current P	rincipal Place	e of Business:	New Princ	New Principal Place of Business:			
	145 COURT 331865139 L	JS					
Current Mailing Address:			New Mailing Address:				
P. O. BOX MIAMI, FL	165139 331165139 L	JS					
FEI Number:	59-1631855	FEI Number Applied For ( )	FEI Number Not Appl	icable ( )	Certificate of Status Desir	red ( )	
Name and	Address of (	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
2600 DOU SUITE # 1	EVANS ESQ GLAS ROAD 109 ABLES, FL 33	3134 US	13691 S.W	JAMES C. EVANS ESQ 13691 S.W. 145TH COURT MIAMI, FL 33186 US			
	named entity of Florida.	submits this statement for the p	ourpose of changing i	ts registered	office or registered agent	t, or both,	
SIGNATUR	RE: JAMES C	C. EVANS		04/20/2005			
	Electro	nic Signature of Registered Age	ent		Date		
Election Car	npaign Financin	g Trust Fund Contribution ( ).					
OFFICERS	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	CD ( EVANS, JAME: 13691 SW 145 MIAMI, FL 331	TH COURT	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	D ( JONES, CATHI 13691 SW 145 MIAMI, FL 331	TH COURT	Title: Name: Address: City-St-Zip:	(	) Change ()Addition		
Title: Name: Address: City-St-Zip:	P ( FULLERTON, I 13691 SW 145 MIAMI, FL 331	TH COURT	Title: Name: Address: City-St-Zip:	D () KELLER, LYN 13691 SW 14: MIAMI, FL 33	5TH COURT		
Title: Name: Address: City-St-Zip:	ST ( COVAS, JUAN 13691 SW 145 MIAMI, FL 331	TH COURT	Title: Name: Address: City-St-Zip:	D (X JONES, IRVIN 13691 SW 149 MIAMI, FL 33	5TH COURT		
Title: Name: Address: City-St-Zip:	(	) Delete	Title: Name: Address: City-St-Zip:	P ( FULLERTON, 13691S.W. 14 MIAMI, FL 33	5TH COURT		
Title: Name:	(	) Delete	Title: Name:	ST ( COVAS, JUAN	) Change (X) Addition A		

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Address:

City-St-Zip:

13691 S.W. 145TH COURT

MIAMI, FL 33186 US

SIGNATURE: JUAN A. COVAS S 04/20/2005