2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2004
Secretary of State

DOCUMENT# 505029

Entity Name: PROFESSIONAL AVIATION CORPORATION

Current Principal Place of Business:

13691 S.W. 145TH COURT
MIAMI, FL 331865139 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 165139
MIAMI, FL 331165139 US

New Mailing Address:

FEI Number: 59-1695233 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JAMES C. EVANS ESQ.
1700 ALFRED I. DUPONT BUILDING
169 E FLAGLER ST
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

JAMES C. EVANS ESQ.
2600 DOUGLAS ROAD
SUITE # 1109
CORAL GABLES, FL 33134 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: 04/06/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: JONES, CATHERINE L
Address: 13691 SW 145TH CT
City-St-Zip: MIAMI, FL 33186 US

Title: CD ( ) Delete
Name: EVANS, JAMES C
Address: 13691 SW 145TH CT
City-St-Zip: MIAMI, FL 33186 US

Title: ST ( ) Delete
Name: COVAS, JUAN A
Address: 13691 SW 145 CT
City-St-Zip: MIAMI, FL 33186 US

Title: P ( ) Delete
Name: FULLERTON, BRUCE
Address: 13691 SW 145 CT
City-St-Zip: MIAMI, FL 33186 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: P (X) Change ( ) Addition
Name: FULLERTON, BRUCE
Address: 13691 SW 145 CT
City-St-Zip: MIAMI, FL 33186 US

Title: ST (X) Change ( ) Addition
Name: COVAS, JUAN A
Address: 13691 SW 145 CT
City-St-Zip: MIAMI, FL 33186 US

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.

SIGNATURE: JUAN A. COVAS S 04/06/2004
Electronic Signature of Signing Officer or Director — Date