

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 838891

FILED
Apr 28, 2006
Secretary of State

Entity Name: AIRBUS SERVICE COMPANY, INC.

Current Principal Place of Business:

4355 NW 36 STREET
MIAMI SPRINGS, FL 33166 US

New Principal Place of Business:

Current Mailing Address:

4355 NW 36 STREET
MIAMI SPRINGS, FL 33166 US

New Mailing Address:

FEI Number: 13-2902359 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: MCARTOR, T. ALLAN
Address: 198 VAN BUREN, STE. 300
City-St-Zip: HERNDON, VA 20170

Title: PD () Delete
Name: WOHNSIGL, ROBIN
Address: 198 VAN BUREN ST., SUITE 300
City-St-Zip: HERNDON, VA 20170

Title: CEO () Delete
Name: COURPRON, HENRI
Address: 198 VAN BUREN, STE. 300
City-St-Zip: HERNDON, VA 20170

Title: VT () Delete
Name: HEIN, ROBERT P
Address: 4355 NW 36 ST
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: D () Delete
Name: GAVIN, PATRICK
Address: 4355 NW 36 ST
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: CS () Delete
Name: MARTIN-NAGLE, RENEE
Address: 198 VAN BUREN ST. SUITE 300
City-St-Zip: HERNDON, VA 20170

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: CEO (X) Change () Addition
Name: ECCLESTON, BARRY
Address: 198 VAN BUREN, STE. 300
City-St-Zip: HERNDON, VA 20170

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

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

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

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: RENEE MARTIN-NAGLE

CS

04/28/2006

Electronic Signature of Signing Officer or Director

Date