

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 15, 2005 8:00 am**  
**Secretary of State**

04-15-2005 90090 037 \*\*\*158.75

<b>DOCUMENT # F00000000838</b> 1. Entity Name <b>BAJ AIR TRAINING SCHOOL LTD, INC.</b>					
Principal Place of Business 2011 S PERIMETER RD SUITE G FT LAUDERDALE, FL 33309			Mailing Address 2011 S PERIMETER RD SUITE G FT LAUDERDALE, FL 33309		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip      Country		Zip      Country		4. FEI Number <b>65-1047986</b>	
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
RAMIREZ, ONEY V 7912 NW 83 ST. TAMARAC, FL 33321			Name  Street Address (P.O. Box Number is Not Acceptable)  City <span style="float: right;"><b>FL</b></span> Zip Code		
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 _____ <small>Signature, typed or printed name of registered agent and site if applicable. (NOTE: Registered Agent signature required when reappointing) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BAJNATH, VARMAN 517 RIVERSIDE DRIVE LANGE PARK, CHAGUANAG TRINID.	<input type="checkbox"/> Delete <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP , VAMAN , CHAGUANAS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS BAJNATH, MARCIA 517 RIVERSIDE DRIVE LANGE PARK, CHAGUANAG TRINID.	<input type="checkbox"/> Delete <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP , CHAGUANAS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAJNATH, RODNEY 14318 SENECA DRIVE BLACKSBURG, VA 24060	<input type="checkbox"/> Delete <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP D BAJNATH, RODNEY 9911 EAST 21ST. STREET NORTH, APT 212 WICHITA, KANSAS 67206			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify 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 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: <u>V. BAJNATH</u> <b>VAMAN BAJNATH PD.</b> <span style="float: right;"><b>APRIL 13 2005</b></span> <span style="float: right;"><b>954 776 0543</b></span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

H0058363  
ATTACHMENT  
# F00000000838

*With Compliments*  
**Pilot Ground Training Centre**

BAJ AIR TRAINING SCHOOL LTD.  
517 RIVERSIDE DRIVE  
LANGE PARK, CHAGUANAS  
TRINIDAD, WEST INDIES

517 Riverside Drive,  
Lange Park, Chaguanas,  
Trinidad, West Indies

PLEASE NOTE THE SPELLING CHANGES

THE CORRECT SPELLING IS AS FOLLOWS :

- ① YAMAN
- ② CHAGUANAS

*Thank you.*

Telephone/Fax.:  
(809) 665-6020

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Approved by The Civil Aviation Division of Trinidad and Tobago