

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003589

FILED
Jan 06, 2006
Secretary of State

Entity Name: GPA ATR II INC.

Current Principal Place of Business:

DEBIS AIRFRANCE USA INC
100 NE THIRD AVENUE, SUITE 800
FT. LAUDERDALE, FL 33301

New Principal Place of Business:

AERCAP USA, INC.
100 NE THIRD AVENUE, SUITE 800
FT. LAUDERDALE, FL 33301

Current Mailing Address:

DEBIS AIRFRANCE USA INC
100 NE THIRD AVENUE, SUITE 800
FT. LAUDERDALE, FL 33301

New Mailing Address:

AERCAP USA, INC.
100 NE THIRD AVENUE, SUITE 800
FT. LAUDERDALE, FL 33301

FEI Number: 13-3621560

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAURA, SHOWALER
100 NE THIRD AVENUE, SUITE 800
FT. LAUDERDALE, FL 33301 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: DP () Delete
Name: PADRON, ISRAEL
Address: 100 NE 3RD AVENUE SUITE 800
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: DS () Delete
Name: SHOWALTER, LAURA B
Address: 100 NE AVENUE SUITE 800
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LAURA B. SHOWALTER

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01/06/2006

Electronic Signature of Signing Officer or Director

_____ Date