

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000533

FILED
Apr 01, 2005
Secretary of State

Entity Name: INTERNATIONAL AVIATION SERVICES 1 INC.

Current Principal Place of Business:

2614 NORTH SUGAR BUSH RD
NEW FRANKEN, WI 54229

New Principal Place of Business:

Current Mailing Address:

2614 NORTH SUGAR BUSH RD
NEW FRANKEN, WI 54229

New Mailing Address:

FEI Number: 39-1999150

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMATO, LOUIS X
801 LAUREL OAK DRIVE, STE 615
NAPLES, FL 34108 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: PCD () Delete
Name: MASSON, JUAN
Address: 15450 SW 232 STREET
City-St-Zip: MIAMI, FL 33170

Title: VD () Delete
Name: ROBERTS, JAMES M
Address: PO BOX 112, 2614 SUGAR BUSH RD
City-St-Zip: NEW FRANKEN, WI

Title: D (X) Delete
Name: ROBERTS, DALE A
Address: PO BOX 112, 2614 SUGAR BUSH RD
City-St-Zip: NEW FRANKEN, WI

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: ROBERTS, JAMES M VP
Address: PO BOX 112, 2614 SUGAR BUSH RD
City-St-Zip: NEW FRANKEN, WI 54229 US

Title: VD (X) Change () Addition
Name: ROBERTS, DALE A CEO
Address: PO BOX 112, 2614 SUGAR BUSH RD
City-St-Zip: NEW FRANKEN, WI 54229 US

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 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: DALE A ROBERTS

CEO

04/01/2005

Electronic Signature of Signing Officer or Director

Date