## **2005 FOR PROFIT CORPORATION ANNUAL REPORT**

## Aug 26, 2005 8:00 am Secretary of State **DOCUMENT # F01000001428** 08-26-2005 90004 014 \*\*\*150.00 ARES AEROSPACE & TECHNOLOGY SERVICES CORPORATION Principal Place of Business Mailing Address 1440 CHAPIN AVENUE, SUITE 390 1440 CHAPIN AVENUE, SUITE 390 50063619 BURLINGAME, CA 94010 **BURLINGAME, CA 94010** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07012005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 94-3161428 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired $\Box$ 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 7, 2005 Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PCD TITLE ☐ Delete TITLE Change Addition STUART, RICHARD J NAME NAME STREET ADORESS 228 SO MEADOW ROAD STREET ADDRESS CITY-ST-ZIP GLENBROOK, NV 89413 CITY-ST-ZIP VSD TITLE ☐ Delete TITLE X Change ☐ Addition NAME SHIPLEY, LARRY E NAME Shipley, Larry E STREET ADDRESS 10013 LAUREL SPRINGS AVE. STREET ADDRESS 102 Skyline Spur LAS VEGAS, NV 89134 CITY-ST-ZIP CITY-ST-ZIP Sun Valley, ID 83353 TVD Delete\_ TITLE TITLE Change Addition GHOSE, AMITAVA NAME NAME STREET ADDRESS STREET ADDRESS 2715 DARNBY DRIVE CITY-ST-ZIP OAKLAND, CA 94611 CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition LYNCH, STANLEY C NAME NAME 30 CORDONE DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SAN ANSELMO, CA 94960 CITY-ST-ZIP Defete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition

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.

NAME

STREET ADORESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

5 tanley Lynch NO YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Jaly 18, 2005

**FILED**