


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006 8:00 am
Secretary of State

04-28-2006 90198 039 ***158.75

DOCUMENT # F02000000059

1. Entity Name
EMBRAER AIRCRAFT HOLDING, INC.



Principal Place of Business
**276 SOUTHWEST 34TH STREET
 FORT LAUDERDALE, FL 33315**

Mailing Address
**276 SOUTHWEST 34TH STREET
 FORT LAUDERDALE, FL 33315**



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04252006 Chg-P CR2E034 (11/05)

4. FEI Number
65-1156742

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**AMERICAN INFORMATION SERVICES, INC.
 ONE SOUTHEAST THIRD AVENUE, 28TH FLOOR
 MIAMI, FL 33131**



7. Name and Address of New Registered Agent

Name **FABIO F. CUNHA**

Street Address (P.O. Box Number is Not Acceptable)
276 S.W. 34th ST

City **FORT LAUDERDALE** FL Zip Code **33315**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C MAURICIO NOVIS BOTELHO <input type="checkbox"/> Delete 276 SOUTHWEST 34TH STREET FORT LAUDERDALE, FL 33315
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OS CARRARI, CESAR F <input checked="" type="checkbox"/> Delete 276 SOUTHWEST 34TH STREET FORT LAUDERDALE, FL 33315
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANTONIO LUIZ PIZARRO MANSO <input type="checkbox"/> Delete 276 SOUTHWEST 34TH STREET FORT LAUDERDALE, FL 33315
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FLEURY CURADO, FREDERICO P <input type="checkbox"/> Delete 276 SOUTHWEST 34TH STREET FORT LAUDERDALE, FL 33315
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SPULAK, GARY J <input type="checkbox"/> Delete 276 SOUTHWEST 34TH STREET FORT LAUDERDALE, FL 33315
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOND, LANGHORNE M <input type="checkbox"/> Delete 276 SOUTHWEST 34TH STREET FORT LAUDERDALE, FL 33315

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CUNHA, FABIO F. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 276 S.W. 34th ST FORT LAUDERDALE, FL 33315
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YOKOTA, SATOSHI <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 276 S.W. 34th ST FORT LAUDERDALE, FL 33315
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODRIGUES, MARCELO B. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 276 S.W. 34th ST FORT LAUDERDALE, FL 33315
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CURADO, FREDERICO F. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 276 S.W. 34th ST FORT LAUDERDALE, FL 33315
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FM APPLETON, CHRISTOPHER J. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 276 S.W. 34th ST FORT LAUDERDALE, FL 33315
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AGUIAR, LUIZ CARLOS SIQUEIRA <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 276 SW 34th ST FORT LAUDERDALE, FL 33315

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____ Date _____ Daytime Phone # _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR