2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F03000000534

Entity Name: RECTRIX AVIATION, INC

FILED Nov 14, 2005 Secretary of State

Entity Nai	me: RECIRIA	CAVIATION, INC.			
Current P	rincipal Place	e of Business:	New Principal Place of	New Principal Place of Business:	
730 BARN AIRPORT	STABLE RD.				
	MA 02601				
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
730 BARNSTABLE RD. AIRPORT HYANNIS, MA 02601			8191 N TAMIAMI TRAIL SUITE 310 SARASOTA, FL 34243		
FEI Number	: 01-0760314	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
STE. 210 SARASOT The above	TH TAMIAMI 1 A, FL 34243	US	purpose of changing its registered o	office or registered agent, or both,	
SIGNATUI	RE: JAMES F	P HAUSCH			
		nic Signature of Registered Ag	ent	Date	
		3(2)(b), F.S., the corporation did no	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	C (RUSSELL, THO 8191 NORTH T SARASOTA, FL	AMIAMI TRAIL	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	PD (HAUSCH, JAMI 8191 NORTH T SARASOTA, FI	AMIAMI TRAIL	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	T (CHILSON, KAT 8191 NORTH T SARASOTA, FI	AMIAMI TRAIL	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	D (CAWLEY, RICI 100 FARM RO SHERBORN, M	AD.	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	S (X WISE, ROBER 31 STATE STR BOSTON, MA	EET	Title: (Name: Address: City-St-Zip:) Change () Addition	

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: JAMES P. HAUSCH PD 11/14/2005