

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004057

FILED
Apr 05, 2007
Secretary of State

Entity Name: AVIATION MAINTENANCE STAFFING, INC.

Current Principal Place of Business:

5300 N.W. 36TH STREET
BUILDING 850
MIAMI, FL 33122 US

New Principal Place of Business:

Current Mailing Address:

5300 N.W. 36TH STREET
BUILDING 850
MIAMI, FL 33122 US

New Mailing Address:

FEI Number: 20-2466888 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: CD () Delete
Name: MCDOWELL, DEREK
Address: 2665 S. BAYSHORE DRIVE, STE. 800
City-St-Zip: MIAMI, FL 33133 US

Title: P () Delete
Name: MALONE, JAMES
Address: 5300 N.W. 36TH STREET BLDG. 850
City-St-Zip: MIAMI, FL 33122 US

Title: ST () Delete
Name: MARTIN, JAMES
Address: 5300 N.W. 36TH STREET BLDG 850
City-St-Zip: MIAMI, FL 33122 US

Title: VCD () Delete
Name: WALSH, PRESTON
Address: 249 FIFTH AVENUE
City-St-Zip: PITTSBURGH, PA 15222 US

Title: D () Delete
Name: GRISIUS, MICHAEL J
Address: 1919 PENNSYLVANIA AVE. NW
City-St-Zip: WASHINGTON, DC 200063434

Title: AS () Delete
Name: PETERS, JEFFREY D
Address: 11 STANWIX STREET, 15TH FLOOR
City-St-Zip: PITTSBURGH, PA 15222 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TEMPLETON, TROY D
Address: 2665 S. BAYSHORE DRIVE, STE. 800
City-St-Zip: MIAMI, FL 33133 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CFOS (X) Change () Addition
Name: MARTIN, JAMES
Address: 5300 N.W. 36TH STREET BLDG 850
City-St-Zip: MIAMI, FL 33122 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JAMES MARTIN

S

04/05/2007

Electronic Signature of Signing Officer or Director

_____ Date