2008 FOR PROFIT CORPORATION

ANNUAL REPORT

FILED Apr 30, 2008 08:00 AN Secretary of State

DOCUMENT # F06000001194 ----1. Entity Name GROSU AVIATION, INC.



Principal Place of Business

3511 SILVERSIDE RD - STE 105 WILMINGTON, DE 19810-4902

Mailing Address

P 0 B0X 586 WAUCHULA, FL 33873



CB2E034 (11/05)

DO NOT WRITE IN THIS SPACE

| 04282008 NO Olig-1 | | |
|----------------------------------|--|-----------------------------------|
| 4. FEI Number | | Applied For |
| 20-3840774 | | Not Applicable |
| 5. Certificate of Status Desired | | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

GROSU, DUMITRU 2460 PINE CONE PARK WAUCHULA, FL 33873

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|---|--|
| The above named entity submits this statement for the purpose of changing its registered the obligations of registered agent. | office or registered agent, or both, in the State of Florida. I am familiar with, and accept |
| SIGNATURE | gent signature required when reinstating) OATE |
| FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financi Trust Fund Contribution. | ng \$5.00 May Be Added to Fees |
| 10. OFFICERS AND DIRECTORS | |
| TITLE P NAME GROSU, DUMITRU STREET ADDRESS 2460 PINE CONE PARK CITY-ST-ZIP WAUCHULA, FL 33873 | |
| THE NAME STREET ADDRESS CITY-ST-ZIP | U00000934130 05/23/08-80019-013 150.00 |
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| TITLE NAME STREET ADDRESS CITY-SI-ZIP | |
| ITILE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exen | notions contained in Chanter 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.

UL ET LOS (LI PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR