2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # F06000001740

1. Entity Name

SEAGULL AIRCRAFT CORPORATION



FILED Feb 07, 2007 08:00 AM Secretary of State

SEAGULE AIRCRAFT CORPORATION				
Principal Place of Business 2170 SE 17TH STREET SUITE 206 FT LAUDERDALE FL 33316 Mailing Address 2170 SE 17TH STREET SUI FT LAUDERDALE FL 33316 FT LAUDERDALE FL 33316				
2. Principal Place of Business - No P.O. Box #		3. Mailing Addross		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1st MOORE CR2E034 (10/06)
City & State		City & Stato		4. FEI Number 13-3448331 Applied For Not Applicable
Zıp	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent	
ROSENBERG, BURTON			Name	
2170 SE 17TH STREET SUITE FT LAUDERDALE FL 33316		206 Street Addres		(P.O. Box Number is Not Acceptable)
			City	FL Zip Codo
	e named entity submits this statement for tions of registered agent.	the purpose of changing its reg	gistered office or registe	orod agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent ar	nd title r applicable. (NOTE: Re	igistered Agent signature require	ed when reinstatung) DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			<u> </u>	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
10.	OFFICERS AND D	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SIEGEL, JESSE 2170 SE 17TH STREET SUITE 206 FT LAUDERDALE FL 33316	☐ Delete	THILE NAME STREET ADDRESS CITY-ST-ZIP	U00000625356 02/14/07-80071-011 50.00
IIILE NAME Street address City-SI-Z!P	DVPS ROSENBERG, BURTON 2170 SE 17TH STREET SUITE 206 FT LAUDERDALE FL 33316	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addilion
NAME STREET ADDRESS CITY-SE-ZIP	T ROSENBERG, BURTON 2170 SE 17TH STREET SUITE 206 FT LAUDERDALE FL 33316	☐ Delete	TITLE NAME STREET ADDRESS CITY-SI-7IP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-7IP	☐ Change ☐ Addilion
TITLE NAME STREET ADDRESS CITY-SI-74P		☐ Delete	IIILE NAME STREET ADDRESS CIFY-SI-7IP	☐ Change ☐ Addilion
TITLE NAME SIREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS	Change Addition

12. I hereby certify that the information supplied with this filing does pst qualify for the exemptions contained in Section 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.

CITY-ST-7IP

SIGNATURE: _

CITY - ST - ZIP

SATURE AND DED OR PRINTED NAME OF SIGNING OFFICER OR ORFICER OR ORFICER OR

7 954-76-844 Devine Phone #