2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 29, 2005 08:00 AM
Secretary of State

DOCUMENT # F92000000234

1. Entity Name
PAN AM INTERNATIONAL FLIGHT ACADEMY INC.

Principal Place of Business	Mailing Address
5000 NW 36TH STREET MIAMI, FL 33122	PO BOX 660920 MIAMI SPRINGS, FL 33266-0920 US

07222005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0367984
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

DO NOT WRITE IN THIS SPACE

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 $550.00
Due by September 7, 2005

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	CHILDS, JOHN
STREET ADDRESS	5000 NW 36 ST
CITY-ST-ZIP	MIAMI, FL 33122
TITLE	DP
NAME	DAVID, WALTER W
STREET ADDRESS	5000 NW 36TH STREET
CITY-ST-ZIP	MIAMI, FL 33122
TITLE	D
NAME	YUN, EDWARD D
STREET ADDRESS	5000 NW 36 ST
CITY-ST-ZIP	MIAMI, FL 33122
TITLE	DEVP
NAME	CUTRONE, VITO A
STREET ADDRESS	5000 NW 36TH STREET
CITY-ST-ZIP	MIAMI, FL
TITLE	CFOE
NAME	GLOVER, PAUL S
STREET ADDRESS	5000 NW 36TH STREET
CITY-ST-ZIP	MIAMI, FL 33122
TITLE	D
NAME	HOPKINS, GLENN
STREET ADDRESS	5000 NW 36 ST
CITY-ST-ZIP	MIAMI, FL 33122

U00000374999
07/29/05-80008-011 558.75

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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: _____ 7/22/05 305-874-6544
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #