2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006
Secretary of State

DOCUMENT# F92000000234

Entity Name: PAN AM INTERNATIONAL FLIGHT ACADEMY INC.

Current Principal Place of Business:

5000 NW 36TH STREET
MIAMI, FL 33122

New Principal Place of Business:

Current Mailing Address:

PO BOX 660920
MIAMI SPRINGS, FL 332660920 US

New Mailing Address:

FEI Number: 65-0367984 **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 32301 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:	D	( ) Delete
Name:	CHILDS, JOHN	
Address:	5000 NW 36 ST	
City-St-Zip:	MIAMI, FL 33122	
Title:	DP	( ) Delete
Name:	DAVID, WALTER W	
Address:	5000 NW 36TH STREET	
City-St-Zip:	MIAMI, FL 33122	
Title:	D	( ) Delete
Name:	YUN, EDWARD D	
Address:	5000 NW 36 ST	
City-St-Zip:	MIAMI, FL 33122	
Title:	DEVP	( ) Delete
Name:	CUTRONE, VITO A	
Address:	5000 NW 36TH STREET	
City-St-Zip:	MIAMI, FL	
Title:	CFOE	( ) Delete
Name:	GLOVER, PAUL S	
Address:	5000 NW 36TH STREET	
City-St-Zip:	MIAMI, FL 33122	
Title:	D	( ) Delete
Name:	HOPKINS, GLENN	
Address:	5000 NW 36 ST	
City-St-Zip:	MIAMI, FL 33122	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	CFOE	(X) Change ( ) Addition
Name:	ROBERT, TURNER	
Address:	5000 NW 36TH STREET	
City-St-Zip:	MIAMI, FL 33122	
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: CUTRONE, VITO, A DEVP 04/27/2006

Electronic Signature of Signing Officer or Director — Date