


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 09, 2005 8:00 am
Secretary of State

08-09-2005 90003 048 ***550.00

DOCUMENT # F94000000584

1. Entity Name
PRATT & WHITNEY ENGINE SERVICES, INC.



Principal Place of Business
**8440 TRADEPORT DR
 STE-105
 ORLANDO, FL 32827 US**

Mailing Address
**1525 MIDWAY PARK RD
 BRIDGEPORT, WV 26330 US**

50060747



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

07282005 Chg-P CR2E034 (10/03)

City & State

4. FEI Number
55-0521794

Applied For
 Not Applicable

Zip Country

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

6. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
 1200 S. PINE ISLAND RD.
 PLANTATION, FL 33324**

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** Delete
 NAME **GAUDETTE, GILBERT**
 STREET ADDRESS **7007 DE LA DAVANNE**
 CITY-ST-ZIP **ST HUBERT, CD**

TITLE **D** Change Addition
 NAME **CASWELL, RICHARD**
 STREET ADDRESS **1000 MARIE VICTORIN**
 CITY-ST-ZIP **LONGUEUIL, QUEBEC, CD**

TITLE **P** Delete
 NAME **PARISIEN, DENIS**
 STREET ADDRESS **7007 DE LA SAVANNE**
 CITY-ST-ZIP **ST HUBERT, CD**

TITLE **P** Change Addition
 NAME **BROSSOIT, BENOIT**
 STREET ADDRESS **7007 DELA SAVANNE**
 CITY-ST-ZIP **ST-HUBERT, QUEBEC, CD**

TITLE **GM** Delete
 NAME **SMITH, GARY**
 STREET ADDRESS **1525 MIDWAY PARK ROAD**
 CITY-ST-ZIP **BRIDGEPORT, WV 26330**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **DOYON, MIGUEL**
 STREET ADDRESS **1000 MARIE VICTORIN**
 CITY-ST-ZIP **LONGUEUIL, CD**

TITLE **T** Change Addition
 NAME **LANGEVIN, ROBERT**
 STREET ADDRESS **7007 DELA SAVANNE**
 CITY-ST-ZIP **ST-HUBERT, QUEBEC, CD**

TITLE **D** Delete
 NAME **RONDEAU, ALAIN**
 STREET ADDRESS **1000 MARIE VICTORIN**
 CITY-ST-ZIP **LONGUEUIL, CD**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **AT** Delete
 NAME **FRAZIER, KENNETH**
 STREET ADDRESS **1525 MIDWAY PARK RD**
 CITY-ST-ZIP **BRIDGEPORT, WV 26330**

TITLE **AT** Change Addition
 NAME **CALDAS, ANTONIO**
 STREET ADDRESS **1525 MIDWAY PARK ROAD**
 CITY-ST-ZIP **BRIDGEPORT, WV 26330**

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, 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: 
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANTONIO CALDAS **07/28/05** **304-842-1335**
 Date Daytime Phone #