

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
02 MAY 31 AM 10:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F94000003654**
1. Entity Name
WINFAIR AVIATION LIMITED CORPORATION

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2085 HURONTARIO STREET Suite, Apt. #, etc. #200 City & State MISSISSAUGA, ONTARIO Zip L5A 4G1 Country CANADA		3. Mailing Address 2085 HURONTARIO STREET Suite, Apt. #, etc. #200 City & State MISSISSAUGA, ONTARIO Zip L5A 4G1 Country CANADA	
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DO NOT WRITE IN THIS SPACE

4. FEI Number 51-0350825	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent	
Name SHARLENE BRENKUS	
Street Address (P.O. Box Number is Not Acceptable) Ste. 260, 800 W. Cypress Creek Road	
City Ft. Lauderdale	FL Zip Code 33309

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.

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>	<p>January 1 - May 15 Fee is \$150.00 After May 15 Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Department of State</p>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVP SHARLENE BRENKUS Ste. 260, 800 W. Cypress Creek Road Ft. Lauderdale, Florida 33309	TITLE NAME STREET ADDRESS CITY - ST - ZIP	700005765317-5 -06/13/02--01034--016 ***1200.00 ****150.00
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BARRY ELLIS 5535 NW 15TH AVENUE FORT LAUDERDALE, FLORIDA, 33304	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST RAYMOND F. VANASSE 2085 HURONTARIO STREET, #200 MISSISSAUGA, ONTARIO, CANADA, L5A4G1	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE
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13. 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 11 or on an attachment with an address, with all other like empowered.