2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000001217

Entity Name: SYMAX AVIATION, INC.

FILED Apr 21, 2006 Secretary of State

Current Principal Place of Business:					New Principal Place of Business:				
PALM BEACH INTERNATIONAL AIRPORT 1512 PERIMETER RD #118 WEST PALM BEACH, FL 33406					PALM BEACH INTERNATIONAL AIRPORT 1512 PERIMETER RD #117 WEST PALM BEACH, FL 33406				
Current Mailing Address:					New Mailing Address:				
30575 BAINBRIDGE ROAD SUITE 130 SOLON, OH 44139					32333 AURORA ROAD SUITE 300 SOLON, OH 44139				
FEI Number:	: 52-2077210	FEI Number	Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificat	te of Status D	esired ()
Name and	Address	of Current Regis	tered Agent:		Name and	Address o	f New Regi	istered Age	ent:
1200 SOU' PLANTATI The above in the State	ON, FL 33 named en of Florida	SLAND ROAD 324 US city submits this st	atement for the pu	urpose o	f changing it	s registere	d office or re	egistered ag	ent, or both,
SIGNATURE: Electronic Signature of Registered Agent					Date				
Election Car		ncing Trust Fund Co	-	ıı			·	Jale	
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	PCD MILLER, S 1415 S OC PALM BEA				Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:		() Delete STACIE L CREEK CIRCLE D HILLS, OH 44022			Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	VD SPILMAN, 120 ASPEN MORELAN				Title: Name: Address: City-St-Zip:		() Change() Addition	
Title: Name: Address: City-St-Zip:		()Delete ROBERT 9TH STREET, STE: ID, OH 44114	3200		Title: Name: Address: City-St-Zip:		(X) Change(VITT B JR 9TH STREET, D, OH 44114	,	
Title: Name: Address: City-St-Zip:		() Delete TER, RICHARD D NBRIDGE RD #130 H 44139			Title: Name: Address: City-St-Zip:		(X) Change(ER, RICHARD DRA ROAD, #3 □ 44139	Ď	
Title:	V/AS	() Delete			Title:	V/AS	(X) Change () Addition	

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.

Name:

Address:

City-St-Zip:

STEINBOCK, MARK A

SOLON, OH 44139

32333 AURORA ROAD, #300

SIGNATURE: RICHARD D ARMBRUSTER T 04/21/2006

STEINBOCK, MARK A

SOLON, OH 44139

30575 BAINBRIDGE RD #130

Name:

Address:

City-St-Zip: