


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 14, 2006 08:00 AM
Secretary of State

DOCUMENT # G54645 1. Entity Name MOORE'S AIRCRAFT ENGINES, INC.	
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Principal Place of Business % MELVIN WALLACE MOORE, JR. 56 NORTH TAMPA AVENUE ORLANDO, FL 32805	Mailing Address % MELVIN WALLACE MOORE, JR. 56 NORTH TAMPA AVENUE ORLANDO, FL 32805
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02102006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2355761	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MOORE, MELVIN WALLACE JR. 56 NORTH TAMPA AVENUE ORLANDO, FL 32805
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**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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

000000509277
04/28/06-80037-022 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MOORE, MELVIN W. JR. 14101 LOST LAKE RD CLERMONT, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST MOORE, TAMMY ANN 14101 LOST LAKE RD CLERMONT, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MOORE, FREDRICK 3721 SR 50 WEBSTER, FL 33597
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Melvin Moore* / *Tammy Moore* 4/10/06 407-422-4318
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Days/Info Phone #