

2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # H87947

1. Entity Name
A.M.J. AVIATION CORP.



Principal Place of Business
1170 LEE WAGENER BLVD.
STE 105
FT. LAUDERDALE, FL 33315

Mailing Address
P.O. BOX 170786
HIALEAH, FL 33017-0786

FILED
Jan 19, 2007 08:00 AM
Secretary of State



01132007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2630964	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ANDERSON, JORDAN
18925 SW 33RD CT
MIRAMAR, FL 33029

**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, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ANDERSON, JORDAN
STREET ADDRESS	1170 LEE WAGENER BLVD. #105
CITY- ST- ZIP	FT. LAUDERDALE, FL 33315

TITLE	VP
NAME	JORDAN, MARCIA I
STREET ADDRESS	1170 LEE WAGENER BLVD # 105
CITY- ST- ZIP	FT. LAUDERDALE, FL 33315

TITLE	
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CITY- ST- ZIP	

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01/19/07-80056-021 150.00

**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: *Marcia Jordan*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/12/07 954-433053
Date Daytime Phone #