

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J06444

FILED  
Jan 20, 2008  
Secretary of State

Entity Name: SOUTHERN AEROBATICS, INC.

## Current Principal Place of Business:

10694 DENOEU RD  
BOYNTON BEACH, FL 33437 US

## New Principal Place of Business:

10694 DENOEU RD  
BOYNTON BEACH, FL 33472 US

## Current Mailing Address:

10694 DENOEU RD  
BOYNTON BEACH, FL 33437 US

## New Mailing Address:

10694 DENOEU RD  
BOYNTON BEACH, FL 33472 US

FEI Number: 59-2701093

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MAYS, MIKE L.  
10694 DENOEU RD  
BOYNTON BEACH, FL 33437 US

## Name and Address of New Registered Agent:

MAYS, MIKE L.  
10694 DENOEU RD  
BOYNTON BEACH, FL 33472 US

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:

01/20/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PST ( ) Delete  
Name: MAYS, MIKE L.,  
Address: 10694 DENOEU RD.  
City-St-Zip: BOYNTON BEACH, FL

Title: VD ( ) Delete  
Name: MAYS, MIKE L.,  
Address: 10694 DENOEU RD.  
City-St-Zip: BOYNTON BEACH, FL

Title: S/T ( ) Delete  
Name: MAYS, MIKE L  
Address: 10694 DENOEU ROAD  
City-St-Zip: BOYNTON BEACH, FL 33437

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition  
Name: MAYS, MIKE L.,  
Address: 10694 DENOEU RD.  
City-St-Zip: BOYNTON BEACH, FL 33472

Title: VD (X) Change ( ) Addition  
Name: MAYS, MIKE L.,  
Address: 10694 DENOEU RD.  
City-St-Zip: BOYNTON BEACH, FL 33472

Title: S/T (X) Change ( ) Addition  
Name: MAYS, MIKE L  
Address: 10694 DENOEU ROAD  
City-St-Zip: BOYNTON BEACH, FL 33472

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: MICHAEL L. MAYS

PRES

01/20/2008

Electronic Signature of Signing Officer or Director

Date