

# **2008 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# L19183

Entity Name: AVIATOR SERVICES, INC.

**FILED**  
**Jun 13, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

14300 SW 129 ST  
203  
MIAMI, FL 33186 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 558496  
MIAMI, FL 33255 US

**New Mailing Address:**

FEI Number: 65-0147563

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

IBARRA, WILLIAM A  
14300 SW 129 ST  
203  
MIAMI, FL 33186 US

**Name and Address of New Registered Agent:**

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: WILLIAM IBARRA

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: IBARRA, WILLIAM A  
Address: 14300 SW 129 ST. #203  
City-St-Zip: MIAMI, FL 33186

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: WILLIAM IBARRA

PD

06/13/2008

Electronic Signature of Signing Officer or Director

Date