2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2005
Secretary of State

DOCUMENT# L72399

Entity Name: TROPICAL AVIATION SERVICES, INC.

Current Principal Place of Business:

17400 SW 48TH ST.
FT. LAUDERDALE, FL 333311106

New Principal Place of Business:

Current Mailing Address:

17400 SW 48TH ST.
FT. LAUDERDALE, FL 333311106

New Mailing Address:

FEI Number: 65-0196123 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ADILI, RONNIE ESQ
8801 PARADISE DR
TAMARAC, FL 33321 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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: ADILI, MIRMOHAMMAD,
Address: 17400 SW 48TH ST.
City-St-Zip: FT. LAUDERDALE, FL

Title: STD ( ) Delete
Name: ADILI, MIRMASOOD
Address: 17400 S W 48TH ST
City-St-Zip: FORTLAND, FL

Title: DVP ( ) Delete
Name: ADILI, ALLEN
Address: 17400 S W 48TH ST
City-St-Zip: FORTLAND, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: ADILI, MIRMOHAMMAD
Address: 17400 SW 48TH ST.
City-St-Zip: FT. LAUDERDALE, FL 33331

Title: STD (X) Change ( ) Addition
Name: ADILI, MIRMASOOD
Address: 17400 S W 48TH ST
City-St-Zip: FT. LAUDERDALE, FL 33331

Title: DVP (X) Change ( ) Addition
Name: ADILI, ALLEN
Address: 17400 S W 48TH ST
City-St-Zip: FT. LAUDERDALE, FL 33331

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MIRMOHAMMAD ADILI DP 03/30/2005

Electronic Signature of Signing Officer or Director — Date