## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# M08244

Entity Name: AIR RIDE CRAFT, INC.

FILED Apr 17, 2005 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:	
	84 AVENUE		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Current Mailing Address:			New Mailin	New Mailing Address:	
15840 S.W. 84TH AVENUE MIAMI, FL 33157 US					
FEI Number:	59-2519038	FEI Number Applied For ( )	FEI Number Not Applic	cable ( ) Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
	NALD E 84 AVENUE 33157 US				
The above in the State		ubmits this statement for the pur	rpose of changing its	s registered office or registered agent, or both,	
SIGNATUR	RE:				
	Electroni	Signature of Registered Agent	t	Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS: AD			ADDITIONS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PSD ( ) I BURG, DONALD 15840 S.W. 84 A MIAMI, FL 3315	VENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () I HODGMAN, JAM 16122 SW 87 CO MIAMI, FL 3315	DURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () I TAKASUGI, ABE. 5366 PASEO OF SANTA BARBAR.	LANDO	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () I LACOMBE, RAYI 1500 NE 105TH MIAMI SHORES,	MOND, ST	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () I FABIAN, CARL, 577 NW 96 STRI MIAMI SHORES,		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VAN DER WALL,	NE BLVD, SUITE 5100	Name: Address:	D (X) Change ( ) Addition VAN DER WALL, ROBERT, 1320 S. DIXIE HWY, SUITE 1275 CORAL GABLES, FL 33146 US	

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: DONALD EARL BURG PSD 04/17/2005