

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT****FILED**
May 02, 2005 08:00 AM
Secretary of State**DOCUMENT # M16556**1. Entity Name
BLACK LION AVIATION CORP.

Principal Place of Business

**9552 NW 38TH STREET
MIAMI, FL 33178**

Mailing Address

**9552 NW 38TH STREET
MIAMI, FL 33178****DO NOT WRITE IN THIS SPACE**

04282005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2548711Applied For
Not Applicable5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

8. Name and Address of Current Registered Agent

**LAMONT & NEIMAN, P.A.
ONE BISCAYNE TOWER
TWO SOUTH BISCAYNE BOULEVARD, SUITE 3550
MIAMI, FL 33131****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 fee if applicable.

(NOTE: Registered Agent signature is required when appointing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**9. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees****10. OFFICERS AND DIRECTORS**

TITLE	DP
NAME	DUNN, GREGORY
STREET ADDRESS	3525 ESTEPONA AVENUE
CITY-ST-ZIP	MIAMI, FL 33178
TITLE	DS
NAME	DUNN, PHILIP
STREET ADDRESS	3525 ESTEPONA AVE.
CITY-ST-ZIP	MIAMI, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #