

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000010195

**FILED**  
**Feb 08, 2011**  
**Secretary of State**

**Entity Name:** WINGS OF AMAZON AEROMEDICAL AND LOGISTICS CORPORATION

**Current Principal Place of Business:**

3840 W HILLSBORO BLVD  
SUITE 124  
DEERFIELD BEACH, FL 33442

**New Principal Place of Business:**

**Current Mailing Address:**

3840 W HILLSBORO BLVD  
SUITE 124  
DEERFIELD BEACH, FL 33442

**New Mailing Address:**

**FEI Number:** 27-4823735

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LINHARES, WANDERLEY  
3840 WEST HILLSBORO BLVD  
SUITE 124  
DEERFIELD BEACH, FL 33442 US

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

TAXPLACE  
1660 WEST HILLSBORO BLVD  
DEERFIELD BEACH, FL 33442 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:** LUCI MIRANDA

02/08/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** LINHARES, WANDERLEY  
**Address:** 3840 WEST HILLSBORO BLVD STE 124  
**City-St-Zip:** DEERFIELD BEACH, FL 33442

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** WANDERLEY LINHARES

P

02/08/2011

Electronic Signature of Signing Officer or Director

Date