2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000073042

FILED May 01, 2006 Secretary of State

Entity Name: AIRCRAFT RESCUE AND FIRE FIGHTING TECHNICAL SERVICES, INCORPORATED

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
501 E BRO RED LION	OADWAY I, PA 17356			
Current N	lailing Addres	s:	New Mailing Addre	ss:
501 E BRO RED LION	DADWAY I, PA 17356			
FEI Number	: 59-3671753	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
BRANNAI	N, SHARON CF	PA		
161 N MA	IN ST. N, FL 32696	US		
		ubmits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,
in the Stat	e oi Fiorida.			
in the Stat SIGNATU				
	RE:	c Signature of Registered Age	ent	 Date
SIGNATU In accordar	RE: Electroni	(2)(b), F.S., the corporation did no		Date
SIGNATU In accordar Election Ca	RE: Electroni	(2)(b), F.S., the corporation did no Trust Fund Contribution ().	ot receive the prior notice.	Date BES TO OFFICERS AND DIRECTORS
SIGNATU In accordar Election Ca OFFICER Title: Name: Address:	RE: Electronince with s. 607.193 mpaign Financing S AND DIRECT	(2)(b), F.S., the corporation did no Trust Fund Contribution (). FORS: Delete PH A SR. AY	ot receive the prior notice.	
SIGNATU In accordar Election Ca	RE: Electroni nce with s. 607.193 mpaign Financing S AND DIRECT P () WRIGHT, JOSE 501 E BROADW RED LION, PA	(2)(b), F.S., the corporation did not Trust Fund Contribution (). FORS: Delete PH A SR. AY 17356 Delete N B AY	ot receive the prior notice. ADDITIONS/CHANG Title: Name: Address:	SES TO OFFICERS AND DIRECTORS
In accordar Election Ca OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	RE: Electroni nce with s. 607.193 mpaign Financing S AND DIRECT P () WRIGHT, JOSE 501 E BROADW RED LION, PA STVP () WRIGHT, KARE 501 E BROADW RED LION, PA	(2)(b), F.S., the corporation did not Trust Fund Contribution (). CORS: Delete PH A SR. AY 17356 Delete N B AY 17356 Delete Delete Delete	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	GES TO OFFICERS AND DIRECTORS () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSEPH WRIGHT PRES 05/01/2006