

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 02, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # P00000112175  
 1. Entity Name  
 INTERNATIONAL AVIATION ADVISORS, INC.



Principal Place of Business      Mailing Address  
 2889 STRAND CIR.                      2889 STRAND CIR.  
 OVIEDO, FL 32765                      OVIEDO, FL 32765

**DO NOT WRITE IN THIS SPACE**



04302008      No Chg-P      CR2E034 (11/05)

4. FEI Number      Applied For  
 59-3703366      Not Applicable

5. Certificate of Status Desired            \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 LOH, WILLIAM B JR.  
 2889 STRAND CIR.  
 OVIEDO, FL 32765

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.            \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	MD
NAME	LOH, WILLIAM B JR.
STREET ADDRESS	2889 STRAND CIR.
CITY- ST- ZIP	OVIEDO, FL 32765
TITLE	D
NAME	LOH, SIMONA
STREET ADDRESS	2889 STRAND CIR.
CITY- ST- ZIP	OVIEDO, FL 32765
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

U000000946768  
 05/30/08-80063-002 150.00

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *William B. Loh Jr.*      *April 29, 2008*      407 234-6620  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #