

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000012793

Entity Name: PAZ AVIATION SALES, INC.

FILED
Sep 11, 2006
Secretary of State

Current Principal Place of Business:

7455 W 2ND ST.
HIALEAH, FL 33014

New Principal Place of Business:

Current Mailing Address:

7455 W 2ND ST.
HIALEAH, FL 33014

New Mailing Address:

FEI Number: 65-1079392

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, JAY
7455 W. 2ND CT.
HIALEAH, FL 33014 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALLEN, JAY
Address: 7455 W. 2ND CT.
City-St-Zip: HIALEAH, FL 33014

Title: V () Delete
Name: ZAMARA, JUAN
Address: 7455 W. 2ND CT.
City-St-Zip: HIALEAH, FL 33014

Title: T () Delete
Name: ALLEN, JANE
Address: 7455 W. 2ND CT.
City-St-Zip: HIALEAH, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JAY ALLEN

PRES

09/11/2006

Electronic Signature of Signing Officer or Director

Date