

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000026814

FILED
Apr 16, 2009
Secretary of State

Entity Name: C & S AVIONICS CORPORATION

Current Principal Place of Business:

8430 NW 68 STREET
UNIT 4
MIAMI, FL 33166

New Principal Place of Business:

6955 NW 82ND AV
MIAMI, FL 33166

Current Mailing Address:

9946 NW 49TH TERRACE
DORAL, FL 33178

New Mailing Address:

6955 NW 82ND AV
MIAMI, FL 33166

FEI Number: 65-1082684

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COCKRELL, DAVID A
9946 NW 49TH TERRACE
DORAL, FL 33178 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: PD () Delete
Name: COCKRELL, DAVID
Address: 9946 NW 49TH TERRACE
City-St-Zip: DORAL, FL 33178

Title: VD () Delete
Name: STEELE, STEVEN Q
Address: 8430 NW 68 STREET UNIT 4
City-St-Zip: MIAMI, FL 33166

Title: S () Delete
Name: COCKRELL, KATHLEEN
Address: 9946 NW 49TH TERRACE
City-St-Zip: DORAL, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: STEELE, STEVEN Q
Address: 6955 NW 82ND AV
City-St-Zip: MIAMI, FL 33166

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

I hereby certify that the information supplied with this filing does not qualify 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: DAVID A COCKRELL

PD

04/16/2009

Electronic Signature of Signing Officer or Director

Date