2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000032613

Entity Name: AERO-JET AVIATION, INC.

FILED Mar 22, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4631 NW 31 AVENUE 1707 S. PERIMETER RD # 220 HANGAR 33B

FORT LAUDERDALE, FL 33309 FORT LAUDERDALE, FL 33309

Current Mailing Address: New Mailing Address:

4631 NW 31 AVENUE 4631 NW 31 AVENUE

220 PMB# 220

FORT LAUDERDALE, FL 33309 FORT LAUDERDALE, FL 33309

FEI Number: 65-1092323 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GARELLEK, STEVEN 700 S FEDERAL HWY SUITE 200-SZG BOCA RATON, FL 33432

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT () Delete Title: DPT (X) Change () Addition Name: HAYMAN, STUART Name: HAYMAN, STUART W

Address: 7794 LA MIRADA DRIVE Address: 4631 NW 31ST AVE PMB#253

City-St-Zip: BOCA RATON, FL 33433 City-St-Zip: TAMARAC, FL 33309

Title: VPS () Delete Title: VPS (X) Change () Addition Name: BERCOVICI, JACOBO Name: BERCOVICI, JACOBO

 Name:
 BERCOVICI, JACOBO
 Name:
 BERCOVICI, JACOBO

 Address:
 860 ASHFORD AVE # 78
 Address:
 860 ASHFORD AVE # 7B

 City-St-Zip:
 SAN JUAN, PR 00907
 City-St-Zip:
 SAN JUAN, PR 00907

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STUART W HAYMAN DPT 03/22/2004