


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2004 8:00 am
Secretary of State

03-25-2004 90016 005 ***150.00

DOCUMENT # P01000075587 1. Entity Name GERMANY AIRCRAFT SERVICES, INC.																													
Principal Place of Business 9050 PINES BLVD STE 450-F PEMBROKE PINES, FL 32024			Mailing Address 9050 PINES BLVD STE 450-F PEMBROKE PINES, FL 32024																										
2. Principal Place of Business		3. Mailing Address																											
Suite, Apt. #, etc.		Suite, Apt. #, etc.																											
City & State		City & State																											
Zip	Country	Zip	Country																										
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent																									
OBERMULLER, KARL H 9050 PINES BLVD STE 450-B PEMBROKE PINES, FL 32024				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>																									
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 _____ (NOTE: Registered Agent signature required when reinstating) <small>Signature typed or printed name of registered agent and title if applicable</small>																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees																									
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%; padding: 2px;">TITLE</td> <td style="width: 70%; padding: 2px;">D</td> <td style="width: 20%; text-align: right; padding: 2px;"><input type="checkbox"/> Delete</td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;">OBERMULLER, KARL H</td> <td></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;">9050 PINES BLVD STE 50-B</td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY- ST- ZIP</td> <td style="padding: 2px;">PEMBROKE PINES, FL 32024</td> <td></td> </tr> </table>			TITLE	D	<input type="checkbox"/> Delete	NAME	OBERMULLER, KARL H		STREET ADDRESS	9050 PINES BLVD STE 50-B		CITY- ST- ZIP	PEMBROKE PINES, FL 32024		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%; padding: 2px;">TITLE</td> <td style="width: 70%; padding: 2px;"></td> <td style="width: 20%; text-align: right; padding: 2px;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY- ST- ZIP</td> <td style="padding: 2px;"></td> <td></td> </tr> </table>			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY- ST- ZIP		
TITLE	D	<input type="checkbox"/> Delete																											
NAME	OBERMULLER, KARL H																												
STREET ADDRESS	9050 PINES BLVD STE 50-B																												
CITY- ST- ZIP	PEMBROKE PINES, FL 32024																												
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																											
NAME																													
STREET ADDRESS																													
CITY- ST- ZIP																													

SIGNATURE: by Karl Obermüller

3-22-04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #