## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P01000097028

1. Entity Name BERKLEY AVIATION, INC.



Principal Place of Business

3015 N OCEAN BLVD #121 FT LAUDERDALE, FL 33308 Mailing Address

3015 N OCEAN BLVD #121 FT LAUDERDALE, FL 33308

## FILED May 03, 2005 8:00 am Secretary of State

05-03-2005 90118 040 \*\*\*150.00



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04292005

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-1145344 Applied For Not Applicable

5. Certificate of Status Desired

Rebecca A Foster 4/29/05 954.563.2444

Davtime Phone #

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FOSTER, REBECCA A 3015 N OCEAN BLVD #121 FORT LAUDERDALE, FL 33308

SIGNATURE:

## 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					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees					
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD FOSTER, REBECCA A 3015 N OCEAN BLVD #121 FT LAUDERDALE, FL 33308				
TITLE NAME STREET ADDRESS CITY+ST-ZIP	VPTD LANDAU, MARC J 3015 N OCEAN BLVD #121 FT LAUDERDALE, FL 33308				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD OTTINO, J P 3015 N OCEAN BLVD #121 FT LAUDERDALE, FL 33308		DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-S1-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify 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 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 ampowered 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.					