2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000053675

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21301 SAWMILL CT.

BOCA RATON, FL 33498

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MACHADO, REGINA T ASS. VP

1844 N NOB HILL RD #434

PLANTATION, FL 33322

CHERRY HILL, NJ 08003

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BRAHIN, LEE

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Entity Name: TURANAIR SYSTEMS, INC.

FILED Apr 22, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1700 S POWERLINE ROAD 3641 NE 4TH AVE. OAKLAND PARK, FL 33334 DEERFIELD BEACH, FL 33442 **New Mailing Address: Current Mailing Address:** 1700 S POWERLINE ROAD 3641 NE 4TH AVE OAKLAND PARK, FL 33334 DEERFIELD BEACH, FL 33442 FEI Number: 33-1005036 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: TURAN, ROBERT L JR TURAN, ROBERT L JR 1700 S POWERLINE ROAD 3641 NE 4TH AVE. OAKLAND PARK, FL 33334 US DEERFIELD BEACH, FL 33442 US 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: 04/22/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO () Delete Title: (X) Change () Addition MOORE, DAVID L CPA Name: Name: MOORE, DAVID L 2770 NE 5TH STREET 2770 NE 5TH STREET Address: Address: City-St-Zip: POMPANO BEACH, FL 33062 City-St-Zip: POMPANO BEACH, FL 33062 **PRES** Title: Title: () Delete () Change () Addition Name: TURAN, JR., ROBERT L DIR Name: 8381 N CORAL CIRCLE Address: Address: NORTH LAUDERDALE, FL 33068 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition TURAN, MARGARET DIR Name: Name: 8381 N CORAL CIRCLE Address: Address: City-St-Zip: NORTH LAUDERDALE, FL 33068 City-St-Zip: Title: () Delete Title: () Change () Addition CATALANO, RHONDA T ASS. VP Name: Name:

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.

Address:

Title:

Name:

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Address:

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SIGNATURE: MARGARET TURAN VP 04/22/2009

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