

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000101505

FILED  
Apr 30, 2011  
Secretary of State

Entity Name: AVIATION SYSTEMS OF FLORIDA, INC.

## Current Principal Place of Business:

4650 SW 51ST  
BAY 709  
DAVIE, FL 33314 US

## New Principal Place of Business:

1824 NORTH UNIVERSITY DRIVE  
PEMBROKE PINES, FL 33024 US

## Current Mailing Address:

4650 SW 51ST  
BAY 709  
DAVIE, FL 33314 US

## New Mailing Address:

1824 NORTH UNIVERSITY DRIVE  
PEMBROKE PINES, FL 33024 US

FEI Number: 11-3654412

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SOHAIL, ASIF  
10659 NW 2ND CIRCLE  
PEMBROKE PINES, FL 33026 US

## Name and Address of New Registered Agent:

SOHAIL, ASIF MR  
10659 NW 2ND CIRCLE  
PEMBROKE PINES, FL 33026 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: ASIF SOHAIL

04/30/2011

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD  
Name: SOHAIL, ASIF MR  
Address: 10659 NW 2ND CIRCLE  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: SVTD  
Name: SOHAIL, NIBEELA MRS  
Address: 10659 NW 2ND CIRCLE  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: VPD  
Name: SOHAIL, HAMZA MR  
Address: 10659 NW 2ND CIRCLE  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: VP  
Name: SOHAIL, HARIS T MR  
Address: 10659 NW 2ND CIRCLE  
City-St-Zip: PEMBROKE PINES, FL 33026

I hereby 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 all other like empowered.

SIGNATURE: ASIF SOHAIL

PD

04/30/2011

Electronic Signature of Signing Officer or Director

Date