2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000104226

Entity Name: BEECHCRAFT FLIGHT ASSOCIATES, INC.

FILED Mar 16, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
urrent Frincipal Flace of Business:	New Finicipal Flace of Business

12010 N.W. 13TH STREET 3581 NW 95TH TERRACE

PEMBROKE PINES, FL 33026 **APT 607**

SUNRISE, FL 33351

Current Mailing Address: New Mailing Address:

12010 N.W. 13TH STREET 3581 NW 95TH TERRACE

PEMBROKE PINES, FL 33026 **APT 607**

SUNRISE, FL 33351

FEI Number: 81-0572113 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:

ALVARADO, VICTOR ALVARADO, VICTOR 12010 N.W. 13TH STREET 3581 NW 95TH TERRACE PEMBROKE PINES, FL 33026 US APT 607

SUNRISE, FL 33351 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: 03/16/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition

Title: () Delete Title: (X) Change () Addition ALVARADO, VICTOR ALVARADO, VICTOR Name: Name: 12010 N.W. 13TH STREET 3581 NW 95TH TERRACE Address: Address:

City-St-Zip: PEMBROKE PINES, FL 33026 City-St-Zip: SUNRISE, FL 33351

Title: (X) Delete Title: SALLUSSO, SERGIO Name: Name: 113 N.W. 29TH STREET Address: Address: SUNRISE, FL 33323 City-St-Zip: City-St-Zip:

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 Statutés. 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: VICTOR A ALVARADO PD 03/16/2005