


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 18, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000018708 1. Entity Name FLO-SUN AIRCRAFT, INC.	
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Principal Place of Business ONE NORTH CLEMATIS STREET SUITE 200 WEST PALM BEACH, FL 33401	Mailing Address ONE NORTH CLEMATIS STREET SUITE 200 WEST PALM BEACH, FL 33401
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02122007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0201520	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent TABERNILLA, ARMANDO A ESQ ONE NORTH CLEMATIS STREET SUITE 200 WEST PALM BEACH, FL 33401	DO NOT WRITE IN THIS SPACE
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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  DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT BLOMQVIST, ERIK J ONE NORTH CLEMATIS ST #200 WEST PALM BEACH, FL 33401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS ARMANDO, TABERNILLA A ONE NORTH CLEMATIS ST #200 WEST PALM BEACH, FL 33401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HERNANDEZ, OSCAR R ONE NORTH CLEMATIS ST #200 WEST PALM BEACH, FL 33401
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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04/26/07-80102-004 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

By: **Armando A. Tabernilla, V.P.**

Date **4/17/07** 561-655-6303
Daytime Phone #