

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000036958

FILED
Jan 12, 2009
Secretary of State

Entity Name: FLIGHT LOGISTICS REPAIR GROUP INC.

Current Principal Place of Business:

15951 SW 41ST STREET
#400
DAVIE, FL 33331

New Principal Place of Business:

15951 SW 41ST STREET
#200
DAVIE, FL 33331

Current Mailing Address:

15951 SW 41ST STREET
#400
DAVIE, FL 33331

New Mailing Address:

15951 SW 41ST STREET
#200
DAVIE, FL 33331

FEI Number: 41-2089214

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELKAIM, MICHAEL M PRES
15951 SW 41ST STREET
#400
DAVIE, FL 33331 US

Name and Address of New Registered Agent:

ELKAIM, MICHAEL M PRES
15951 SW 41ST STREET
#200
DAVIE, FL 33331 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:

01/12/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: ELKAIM, MICHAEL M PRES
Address: 15951 SW 41ST STREET #400
City-St-Zip: DAVIE, FL 33331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: ELKAIM, MICHAEL M PRES
Address: 15951 SW 41ST STREET #200
City-St-Zip: DAVIE, FL 33331

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.

SIGNATURE: MICHAEL ELKAIM

PRES

01/12/2009

Electronic Signature of Signing Officer or Director

Date