

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000109387

FILED
Apr 18, 2007
Secretary of State

Entity Name: AVIATION MAINTENANCE PLUS INC,

Current Principal Place of Business:

128 SUNFLOWER CIRCLE
ROYAL PALM BEACH, FL 33411 US

New Principal Place of Business:

Current Mailing Address:

P.O BOX 213122
ROYAL PALM BEACH, FL 33421 US

New Mailing Address:

FEI Number: 83-0372023

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCMILLIAN, ANDRE
128 SUNFLOWER CIRCLE
ROYAL PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCMILLIAN, ANDRE
Address: 128 SUNFLOWER CIRCLE
City-St-Zip: ROYAL PALM BEACH FL, FL 33411 US

Title: T () Delete
Name: DALY, ELEANOR
Address: 16434 79TH CT N
City-St-Zip: LOXAHATCHEE, FL 33470 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ANDRE MCMILLIAN

PRES

04/18/2007

Electronic Signature of Signing Officer or Director

Date