## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000151958

Entity Name: CPR AERONAUTICAL GROUP, INC

FILED Jul 27, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2765 KISINGTON CIRCLE 2525 MONTCLAIRE CIRCLE WESTON, FL 33332 US WESTON, FL 33327 US

Current Mailing Address: New Mailing Address:

2765 KISINGTON CIRCLE 62 INDIANTRACE # 72 WESTON, FL 33332 US WESTON, FL 33326 US

FEI Number: 20-1601017 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:

ROVATI, CARLOS
2765 KISINGTON CIRCLE
WESTON, FL 33332 US
ROVATI, CARLOS
2525 MONTCLAIRE CIRCLE
WESTON, FL 33327 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: CARLOS 07/27/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P () Delete
 Title:
 P (X) Change () Addition

 Name:
 ROVATI, CARLOS
 Name:
 ROVATI, CARLOS

 Address:
 2765 KISINGTON CIRCLE
 Address:
 2525 MONTCLAIRE CIRCLE

City-St-Zip: WESTON, FL 33332 US City-St-Zip: WESTON, FL 33327 US

Title: T ( ) Delete Title: T (X) Change ( ) Addition Name: ROVATI, CARLOS Name: ROVATI, CARLOS

Address: 2765 KISINGTON CIRCLE Address: 2525 MONTCLAIRECIRCLE City-St-Zip: WESTON, FL 33332 US WESTON, FL 33332 US

 $\label{eq:title:S} {\sf Title:} \qquad {\sf S} \qquad {\sf ( ) Delete} \qquad \qquad {\sf Title:} \qquad {\sf S} \qquad {\sf (X) Change ( ) Addition}$ 

 Name:
 ROVATI, CARLOS
 Name:
 ROVATI, CARLOS

 Address:
 2765 KISINGTON CIRCLE
 Address:
 2765 KISINGTON CIRCLE

 City-St-Zip:
 WESTON, FL 33332 US
 City-St-Zip:
 WESTON, FL 33327 US

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: CARLOS ROVATI P 07/27/2006