

FILED
Aug 02, 2006 8:00 am
Secretary of State

08-02-2006 90001 028 ***150.00

**2006 FOR PROFIT CORPORATION
 ANNUAL REPORT**


DOCUMENT # P04000045346

1. Entity Name
BUSINESS AIR PARTS, INC.



Principal Place of Business 1811 NW 51 ST #42A FORT LAUDERDALE, FL 33309	Mailing Address 1811 NW 51 ST #42A FORT LAUDERDALE, FL 33309
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DO NOT WRITE IN THIS SPACE



07052006 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0879875	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

BARR, E.A., DANIEL A
7320 GRIFFIN ROAD SUITE 203
DAVIE, FL 33314

**DO NOT WRITE
 IN THIS SPACE**

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
 Due by September 6, 2006**

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

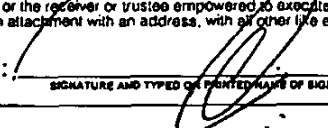
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODRIGUES CORDEIRO, LEANDRO 7320 GRIFFIN ROAD SUITE 203 DAVIE, FL 33314
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARTH FREITAS, JOSE ANTONIO 7320 GRIFFIN ROAD SUITE 203 DAVIE, FL 33314
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**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 info empowered.

SIGNATURE:  (DIRECTOR) Date: **07.10.2006**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR