2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2005
Secretary of State

DOCUMENT# P04000130786

Entity Name: FLYSUL CORP

Current Principal Place of Business:

11331 NW 24 ST
PLANTATION, FL 33323

New Principal Place of Business:

10431 NW 24TH STREET
SUNRISE, FL 33322

Current Mailing Address:

11331 NW 24 ST
PLANTATION, FL 33323

New Mailing Address:

10431 NW 24TH STREET
SUNRISE, FL 33322

FEI Number: 20-1635265 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OLIVEIRA, LUIZ C
11331 NW 24 ST
PLANTATION, FL 33323 US

Name and Address of New Registered Agent:

OLIVEIRA, LUIZ C
10431 NW 24TH STREET
SUNRISE, FL 33322 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: LUIZ C OLIVEIRA 03/14/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete
Name: OLIVEIRA, LUIZ C
Address: 11331 NW 24 ST
City-St-Zip: PLANTATION, FL 33323

Title: DVS ( ) Delete
Name: AIGNER, RITA C
Address: 11331 NW 24 ST
City-St-Zip: PLANTATION, FL 33323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVS (X) Change ( ) Addition
Name: AIGNER, RITA C
Address: 10431 NW 24TH STREET
City-St-Zip: SUNRISE, FL 33322

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LUIZ C OLIVEIRA DPT 03/14/2005
Electronic Signature of Signing Officer or Director Date