2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 29, 2005
Secretary of State

DOCUMENT# P04000146866

Entity Name: AVIATION SPARES INTERNATIONAL, INC.

Current Principal Place of Business:

12949 W OKECHOBEE RD C1
HIALEAH GARDENS, FL 33016

New Principal Place of Business:

12949 W OKECHOBEE RD C1
HIALEAH GARDENS, FL 33018

Current Mailing Address:

12949 W OKECHOBEE RD C1
HIALEAH GARDENS, FL 33016

New Mailing Address:

12949 W OKECHOBEE RD C1
HIALEAH GARDENS, FL 33018

FEI Number: 20-1802755 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAGIGAS, RAIXA
12949 W OKECHOBEE RD C1
HIALEAH GARDENS, FL 33016 US

Name and Address of New Registered Agent:

CAGIGAS, RAIXA
12949 W OKECHOBEE RD C1
HIALEAH GARDENS, FL 33018 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: RAIXA CAGIGAS 06/29/2005
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:

Title: P ( ) Delete
Name: CAGIGAS, RAIXA
Address: 12949 W OKECHOBEE RD C1
City-St-Zip: HIALEAH GARDENS, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CAGIGAS, RAIXA
Address: 12949 W OKECHOBEE RD C1
City-St-Zip: HIALEAH GARDENS, FL 33018

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: RAIXA CAGIGAS P 06/29/2005
Electronic Signature of Signing Officer or Director Date