

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2006 8:00 am
Secretary of State

01-17-2006 90236 049 ***150.00

60002102



DOCUMENT # P05000010200 1. Entity Name PLANE TECH SERVICE, INC.																													
Principal Place of Business 14359 SW 127 ST MIAMI, FL 33186			Mailing Address 14359 SW 127 ST MIAMI, FL 33186																										
2. Principal Place of Business 14300 S.W 129 ST Suite, Apt. #, etc. HANGAR MB. City & State Miami FL Zip 33186		3. Mailing Address 14300 SW 129 ST Suite, Apt. #, etc. HANGAR MB. City & State Miami FL Zip 33186		01062006 Chg-P CR2E034 (11/05)																									
4. FEI Number 20-2148992		<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable																											
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent MENDOZA, LAZARO 14359 SW 127 ST MIAMI, FL 33186																									
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;">FL Zip Code</div>				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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																									
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																											
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">D</td> <td style="width: 40%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>MENDOZA, LAZARO</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>12730 SW 77 ST</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>MIAMI, FL 33183</td> <td></td> </tr> </table> </div> <div style="width: 48%;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;"></td> <td style="width: 40%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> </table> </div> </div>						TITLE	D	<input type="checkbox"/> Delete	NAME	MENDOZA, LAZARO		STREET ADDRESS	12730 SW 77 ST		CITY- ST- ZIP	MIAMI, FL 33183		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY- ST- ZIP		
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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 like empowered.																													
<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> SIGNATURE: <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> </div> <div style="width: 20%; text-align: center;"> 1-12-06 <small>Date</small> </div> <div style="width: 30%; text-align: center;"> 305-254-9797 <small>Daytime Phone #</small> </div> </div>																													