2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000025272

Entity Name: A.N. AVIATION, INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business: New Principal Place	of Business:
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2506 SHOMA DRIVE 17316 83RD PL N

WEST PALM BEACH, FL 33414 LOXAHATCHEE, FL 33470

Current Mailing Address: New Mailing Address:

2506 SHOMA DRIVE 17326 83RD PL N

WEST PALM BEACH, FL 33414 LOXAHATCHEE, FL 33470

FEI Number: 56-2508023 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:

INIGUEZ, WILLIAM L
2506 SHOMA DRIVE

INIGUEZ, WILLIAM L
17316 83RD PL N

WEST PALM BEACH, FL 33414 US LOXAHATCHEE, FL 334470 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: 04/30/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 INIGUEZ, WILLIAM L
 Name:
 INIGUEZ, WILLIAM L

 Address:
 2506 SHOMA DRIVE
 Address:
 17316 83RD PL N

 City-St-Zip:
 WEST PALM BEACH, FL 33414
 City-St-Zip:
 LOXAHATCHEE, FL 33470

Title: V () Delete Title: V (X) Change () Addition Name: INIGUEZ, RUTH Name: INIGUEZ, RUTH

 Address:
 2506 SHOMA DRIVE
 Address:
 17316 83RD PL N

 City-St-Zip:
 WEST PALM BEACH, FL 33414
 City-St-Zip:
 LOXAHATCHEE, FL 33470

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

 Name:
 INIGUEZ, ANAHI
 Name:
 INIGUEZ, ANAHI

 Address:
 2506 SHOMA DRIVE
 Address:
 17316 83RD PL N

City-St-Zip: WEST PALM BEACH, FL 33414 City-St-Zip: LOXAHATCHEE, FL 33470

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

 Name:
 INIGUEZ, ANEL
 Name:
 INIGUEZ, ANEL

 Address:
 2506 SHOMA DRIVE
 Address:
 17316 83RD PL N

City-St-Zip: WEST PALM BEACH, FL 33414 City-St-Zip: LOXAHATCHEE, FL 33470

I hereby certify that the information supplied with this filing does not qualify 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: ANEL INIGUEZ D 04/30/2008