2008 FOR PROFIT CORPORATION

ANNUAL REPORT FILED DOCUMENT # P05000031453 Jul 17, 2008 08:00 AM Secretary of State AVIATION RESOURCE GROUP, INC. Principal Place of Business Mailing Address 1100 LEE WAGENER BLVD JET CENTER 1100 LEE WAGENER BLVD JET CENTER **STE 311 STE 311** FT LAUDERDALE, FL 33315 US FT LAUDERDALE, FL 33315 06042008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 42-1663576 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RAKIC, MILAN DO NOT WRITE 1100 LEE WAGENER BLVD JET CENTER **STE 311** IN THIS SPACE FT LAUDERDALE, FL 33315 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. U0000095547S 97/17/08-80006-917-150.60 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 12, 2008 Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS TITLE NAME RAKIC, MILAN 3675 N COUNTRY CLUB DR #1103 STREET ADDRESS CITY-ST-ZIP AVENTURA, FL 33180 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRI CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. Thereby certify that the information supplied with this filling 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 the 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 in changed, or on an attachment

SIGNATURE

NAME STREET ADDRESS CITY-ST-ZIP

Daytime Phone #